

THE NATIONAL ARCHIVES

CERT. NO. 932,712

PENSIONER:

Theresa

Widow OF

VETERAN:

Alfred DeBeau

CAN NO:

68,455

BOOK NO:

5

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Pension Claim No.

Name and rank of claimant.

Company

Reg't

Rank,

Claimant's post office address.

(Post office address of the Board.)

(Date of examination.)

We hereby certify that in compliance with the requirements of the law* we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz:

Cause of disability.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of _____ dollars per month.

Pulse rate per minute, 76; respiration, 18; temperature, 98.6; height, 5 feet 2 1/2 inches; weight, 144 pounds; age, 42 years.

Here give the claimant's statement as briefly and as compactly as possible.

He makes the following statement upon which he bases his claim for original at Atlanta after leaving there on Sherman's March to the Sea Nov. 16. He then on or about March 25, 1865, contracted deafness in both ears, existing in a degree, nearly total. It was caused by discharge of artillery and musketry close to me principally at Atlanta. I think or rather I am certain that my hearing has been getting worse and worse of late years.

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant.

Upon examination we find the following objective conditions: Left tympanum is per- forated near anterior border and there is some discharge from anterior auditory opening. Right tympanum has lost its transverse and there are two oval shadow spots on either side and above the left spot. "about 2 lines in height diameter." Claimant cannot hear tick of watch either ear on contact in either ear, nor on indirect process but hear loud voice at a distance of 6 feet and now loud conversation is understood by him at 4 feet distance. There is an abnormal condition of pharynx and nasal cavity. General health is quite good. As applicant is severely deaf in both ears on outside his disability equivalent to $\frac{12}{18}$ of total loss of hearing or 2/3 of it.

It must be borne in mind that the duty of the Surgeon is to give an opinion as to the proportionate degree of disability, as 1, 1/2, total, &c., through the grades, without any regard to dollars and cents, and to make such a full particular description as will afford to this Office the ground for intelligent opinion and action in rating.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, _____ probable that the disability was incurred in the service as he claims, and that it has

not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a $\frac{12}{18}$ third rating for the disability caused by deafness in both ears, for that caused

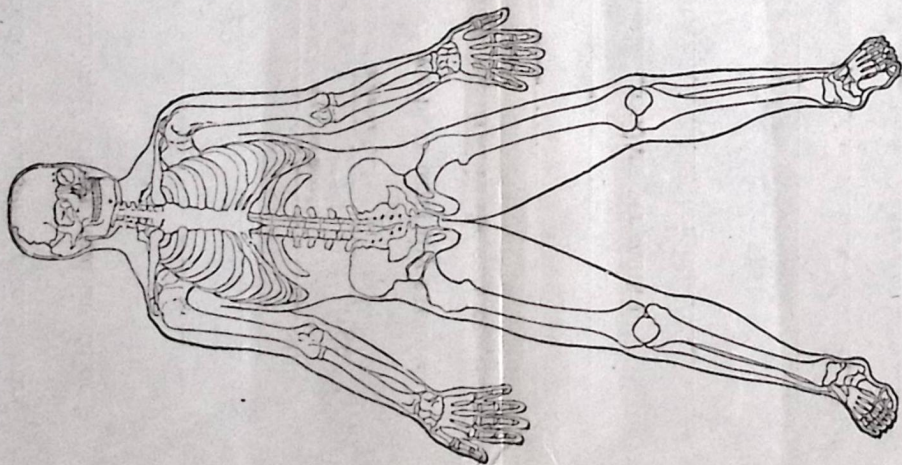
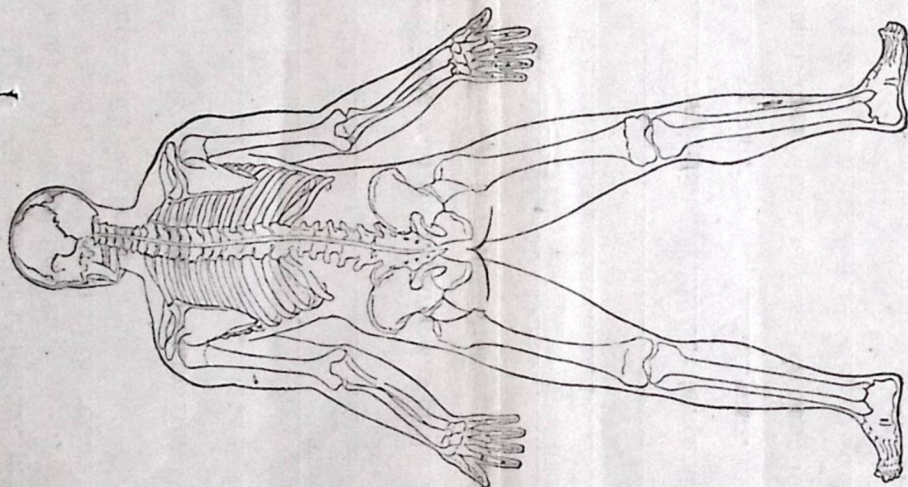
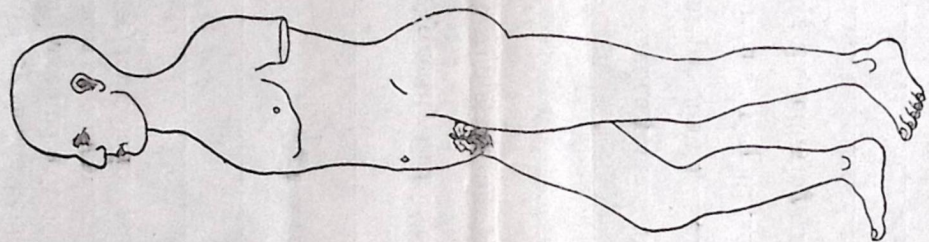
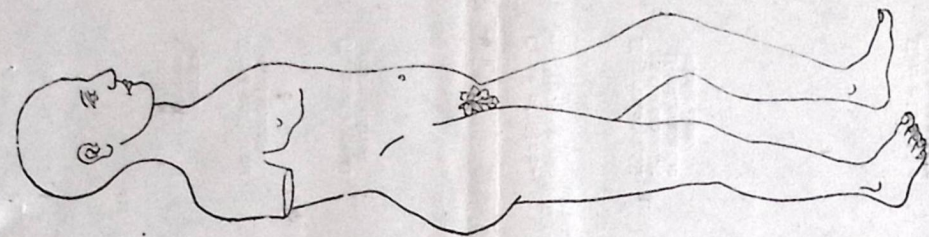
by _____, and _____ caused by _____

* See the back.

† Here state whether for original, increase, restoration, or renewal, or for a re-rating

B. G. Brett, Pres. Am. Kersten, Sec'y. J. B. Rhoads, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

SURGEON'S CERTIFICATE

IN CASE OF

Alfred Desbec, Priv.

Co. *17* Reg't *15* Vols.

Applicant for *Original*

No. *66,805*

DATE OF EXAMINATION:

August 3^d, 188*7*.

B. C. Butt, Pres.,

Am. Kertan, Sec'y,

H. Rhode, Treas.,

BOARD.

Post office, *Grass Bay*

County, *Prima*

State, *Wisconsin*

P. S. Write your Post-Office address plainly and in full.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [Extract from Section 4, Act of Congress approved July 25, 1882.]

STATE OF WISCONSIN,
Oconto County } ss.

I, John Wesner, Jr., Register of Deeds, in and for the County and State afore-
said, do hereby certify that I have carefully compared the copy hereto attached with
the original *record*.....now in my office, which record was made on the *9th*.....
day of *May*.....A. D. *1883* at.....o'clock.....M., in Vol. *2*....., Page *116*
of *marriages*.....and that the same is a true and correct transcript therefrom and
of the whole thereof.

Witness my hand and official seal at Oconto on this *17*.....
day of A. D. *March*.....19*23*.....

.....
John Wesner Register
M. L. Berkeley Dep.

RECORDED
MAR 28 1923

RECORDED
MAR 28 1923
OFFICE OF THE REGISTER OF DEEDS
OCONTO COUNTY, WISCONSIN

3-732

Cert. No.

932712

ACT OF MAY 1, 1920

INCREASED TO \$40 PER MONTH FROM
JULY 4, 1930 - ACT JUNE 9, 1930

DK

Theresa

Widow

of

Alfred D. Beck

Rank

Private

Company

G.

Regiment

17 Wisconsin Inf

Rate per Month \$ 30.

Commencing

March 5, 1923

Ending

Agency
or
Group No.]

Group 1

Issued

April 21, 1923, 19

6-3387

Mitchell
McIntosh Ex'r. 3-553 WCH
No. DEPENDENT.

Act of ACT OF MAY 1, 1920

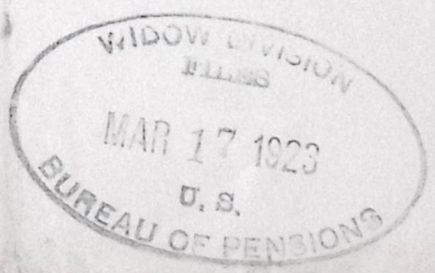
Theresa Des Beck
Oconto
Wis.
Widow
Alfred Des Beck
G. 17 Wis. Inf

Died Feb. 24, 1923, Oconto, Wis.
No other claim. Than
J. 6. 396/76

Mich 16, 1926 Clerk.
Application filed: Mar. 5, 1923.
Attorney: Adjt. Genl. of Wis.
P. O. Madison, Wis.

Cert. of Dis. Searched for _____, 19 0'0

Notified Chaut. Mar. 16, 1923
Mich 26, 1923 17
Adjt. Genl. Madison, Wis.
Death of soldier
marriage to soldier
cohabitation and non-
divorce from 1895.
Christian name
Theresa or Theresa
Mary, spelling
soldier's surname
Deshea Desbeck or
Des Beck (Ar. 1,209)
Wm. M. Mid. Div.



Section 3-416

bag

Widow

Division

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

APR

DIVISION

April 5

1923

No. Claim

W.O. 1201979

Cert. No.

Inw. 396176

Claimant,

Theresa De Beck

Soldier,

Alfred De Beck

Service,

17 Wis. Inf.

Respectfully

referred to the

Chief of the Record
Division under
Section 327 of the
orders for correction
of records.

Soldier's correct surname
De Beck.

See claimant's
statement

E. J. Morgan

Chief of Widow Division.

Mitchell

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS
RECORD DIVISION

Briefed by *J N B*

Orig. *1201979*

Cert. *396176*

Claimant *Theresa De Beck*

Soldier *Alfred De Beck*

Service *G 17 Wis Inf.*

No. *other* claim, Service record *4-10*, 192*3*

B, Clerk.

No. claim, Alph'b record _____, 192

_____, Clerk.

REMARKS:

Records corrected

J. N. B.
Chief Division.

IN REPLY REFER TO

Widow Division,
W.O. 1201979
Theresa Des Beck
Alfred Des Beck
G-17th Wis. Inf.

3-1865

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

WASHINGTON

March 26, 1923

Evidence sent forward to Bu
3-26-1923

The Adjutant General,
Madison, Wisconsin.

MJR
Pension Clerk

Sir:

In the above cited claim you are advised that the claimant's name appears as Theresa and Theresa Mary. She should state her correct Christian name, how she wishes it to appear in the certificate in case one is issued to her, and she should sign her name the way she wishes it to appear. She should also state the correct way to spell the soldier's surname, as it appears spelled Desbec, Desbeck and Des Beck.

The claim also requires the evidence indicated in the accompanying circular letter.

Respectfully,

Washington Gardner

MBM-HM

Commissioner.



Widow Division,
W.O. 1201979
Theresa Des Beck
Alfred Des Beck
G-17th Wis. Inf.

MBM-HM

M 53

WIDOW

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS
WASHINGTON

March 26, 1923.

APR 2 1923

U. S.
DEPT. OF PENSIONS

The Adjutant General,
Madison, Wisconsin.

Sir:

In the above-entitled claim the evidence indicated in paragraphs
No. 1, 2 and 9 should be furnished.

1. A verified copy of the public record, or, if no such record exists,
the sworn statement of the attending physician, showing the date
of the soldier's death.

If such evidence cannot be obtained, the sworn statement of witnesses
present at the death, or having personal knowledge of same, should be furnished,
showing the fact and date of the soldier's death.

2. A verified copy of the public or church record of the claimant's
marriage to the soldier; or, if no such record exists, the sworn statement of
the person who performed the ceremony; or, if that cannot be obtained, the sworn
statement of two persons who were present at the marriage, showing the date thereof.

If the evidence of marriage above indicated cannot be obtained,
there should be furnished the sworn statement of two persons showing whether the
_____ and claimant lived together as husband and wife and were so recog-
nized, and showing where and how long within the knowledge of the persons testify-
ing the _____ and claimant so lived together.

3. The claimant's sworn statement showing whether either she or the
_____ had been married prior to their marriage to each other; and, if so,
the number of times, the name of each former husband or wife, the date of each for-
mer marriage, and the date and manner of dissolution of each former marriage.

4. If the claimant had been previously married, her sworn statement
showing whether any former husband served in the Army or Navy of the United States;
and, if so, the designation of such service, and whether any application for pension
has been made by herself or any other person based on such service.

5. If the claimant had been previously married, the fact and date of
death or divorce of each former husband should be proved: in case of death, by a
verified copy of the public record, or, if no such record exists, by the sworn state-
ment of witnesses present at the death, or having personal knowledge of same; in
case of divorce, by a verified copy of the decree of court.

6. If there _____ marriage of
the fact should be shown by the sworn statement of witnesses who have known her
and are able to testify from personal knowledge.

WIDOW DIVISION
WIDOW
APR 2 1923

7. If the _____ had been previously married, the fact and date of death or divorce of each former wife should be proved: in case of death, by a verified copy of the public record, or, if no such record exists, by the sworn statement of witnesses present at the death, or having personal knowledge of same; in case of divorce, by a verified copy of the decree of court.

8. If there _____ marriage of the fact should be shown by the sworn statement of witnesses who knew him and are able to testify from personal knowledge.

✓ 9. The sworn statement of witnesses having knowledge of the facts, showing whether soldier and claimant were ever divorced, and whether they lived together as husband and wife from 1895 to the date of the soldier's death.

10. If the claimant has not remarried since the _____ death, that fact should be shown by the sworn statement of witnesses who have known her during this period. If she has remarried, the date of remarriage should be shown by evidence of the kind indicated in paragraph 2.

11. The date of birth of each child claimed for should be shown by evidence in the following order: By a duly verified copy of the public record or the church record of baptism; or, by the sworn statement of the physician who attended the mother; or, by the sworn statement of a person who was present at the birth, who should state how she is able to fix the date.

12. The sworn statement of two witnesses showing whether the child _____ claimed for (naming child _____) _____ living; if any has died, proof of the date of death should be furnished.

13. The claimant's sworn statement showing the name under which she was married to the _____

14. The claimant's sworn statement naming the places of her residence since the death of the _____, giving dates.

15. The claimant's sworn statement showing the _____ height and complexion, the color of his hair and eyes, his age and occupation at the date of enlistment, and the place of his birth.

16. The discharge certificate of the _____

17. Some paper bearing the _____ signature made about the time of his service.

✓ All sworn statements should be made before some officer authorized to administer oaths for general purposes.

✓ Persons testifying should state their ages, post-office addresses, and means of knowledge of the facts to which they testify.

✓ Copies of records should be over the signature and official seal of the person having custody of the record. If such person has no seal of office, then the correctness of the copy should be sworn to

✓ Do not fail to inscribe on each paper furnished the name and service of the soldier and the number of the claim to which it relates.

Very respectfully,

Washington Gardner

Commissioner.

Widow Division,
W.O. 1201979
Theresa Des Beck
Alfred Des Beck
G-17th Wis. Inf.

MBM

March 26, 1923

The Adjutant General,
Madison, Wisconsin.

Sir:

In the above cited claim you are advised that the claimant's name appears as Theresa and Theresa Mary. She should state her correct Christian name, how she wishes it to appear in the certificate in case one is issued to her, and she should sign her name the way she wishes it to appear. She should also state the correct way to spell the soldier's surname, as it appears spelled Desbec, Desbeck and Des Beck.

The claim also requires the evidence indicated in the accompanying circular letter.

Respectfully,

MBM-HM

Commissioner.

INVALID.

mo Cert. No. 396 176
 Name, Alfred Disbeck
 Rank, Priv; Service, Co G 17th Wis

Original Roll: Group 1
 Agency or Group No. Transf'd _____, 1, to _____
 " _____, 1, to _____

Issued _____ Jan'y 30. 1919

Rate, \$ 35⁰⁰, from Oct 17. 1918

Deductions: _____

Disability: ACT OF MAY 11, 1912

Issued _____

Rate, \$ _____, from _____

Deductions: _____

Disability: _____

Issued _____

Rate, \$ _____

from _____
 Accrued Pension,
 ACT OF MARCH 2, 1895.

Accrued Pension Order

Issued Apr. 21. 1923

Deductions: _____

Payable to widow
 Sent _____

Disability: _____

to Finance Division.

Issued _____

Rate, \$ _____

from _____

Deductions: _____

Disability: _____

su MC 932712

INDORSEMENTS.

BOARD OF REVIEW.

DEPARTMENT OF THE INTERIOR,
BUREAU OF PENSIONS.

Washington, D. C., Nov. 13th, 1918

No. Claim, 396.176

Cert. No. alfred Desbriks

Claimant, alfred Desbriks

Soldier, G. 17 Reg't Wis Inf

Co. G. 17 Reg't Wis Inf

Respectfully, returned to

Mr. Labor Reviewer
(Mr. Albright)

The official character
of the Justice of the
Peace, before whom the
deposition was executed
is not shown.

W. Kitchin
R. D.

Chief, Board of Review.

INVALID. (Series.....)

Cert. No. **396176**Name, *Alfred Desbeck*Rank, *Pvt*; Service, *Co' G. 17. Wis Vol*
Irish Brigade *Inf*Original Roll: *Midwaukee*Agency. Transf'd....., 18....., to *Go-1*

"....., 18....., to.....

Issued *May-21*....., 1888Mailed *" 24 "*....., 1888Rate and Period, \$ *12*....., from *Apr 19*, 1887

Deductions:.....

Disability: *Severe deafness of both ears*Issued *10 Feb 8*....., 1889Mailed *" 14 "*....., 1889Rate and Period, \$ *22*....., from *Aug 27*, 1888

Deductions:.....

Disability: *Severe deafness of both ears*ms
Issued *Nov 20 - 1918*, 18

Mailed....., 18

Rate and Period, \$ *30*....., from *Oct 17 1918*, 18

Deductions:.....

Disability:.....

ACT OF MAY 11, 1912

Issued....., 18

Mailed....., 18

Rate and Period, \$....., from....., 18

Deductions:.....

Disability:.....

INDORSEMENTS.

M. K. Cham
R. R. W.

BOARD OF REVIEW.

DEPARTMENT OF THE INTERIOR,

BUREAU OF PENSIONS

Washington, D. C.,

November 11, 1918

No. Claim, _____

Cert. No. _____

396176

Claimant, _____

Soldier, _____

Co. _____

17 Reg't Wisconsin Inf

Respectfully, returned to the

Chief of the Civil War Division

Although claimant alleged
in pending claim that he
is 72 years of age, in his
marriage circular he stated
that he was born in 1848

He should be called upon
to state the correct date of
his birth and to furnish proof
of his date, and age & personal
description should be ob-
tained from the War Department.

Com Labor
Reviewer

Chief, Board of Review.

allow \$20
and forward to
Civil War Div.
all J. P. R.
Nov. 16, 1918

THERESA DE BECK

OCONTO WIS

932712

MAY WID

Not 75

Hold on Desk for
Census Report of Jan'y 10, 1919

Alt: 396.176
Desbeck

~~Can
Went to files~~

~~Jan. 13. 1919.~~

Myers

Myers

Jan 21

19

Reissu.

3-419.

ACT OF MAY 11, 1912,

CIVIL WAR DIVISION.

Nyers J, Examiner.
(Write surname first plainly.)

I.C. No. *396176*
(Class.)

Soldier, *Alfred Desbeck*

Co. *C*, *17* Reg't *Wis. Inf*

Submitted for *Ad. Adv.*, 19 *18*

_____, Reviewer, _____, 19

Resubmitted for _____, 19

_____, Reviewer, _____, 19

FROM BOARD OF REVIEW TO

Examiner _____

2d charge _____

3d charge _____

Sp. Ex. Div. _____

2d charge _____

Law Div. _____

Finance Div. _____

Misc. charges _____

Cert. Div. *Nov 19/18*

(Use this slip in resubmitting the case.)

No 396.176

UNITED STATES AMERICA

DEPARTMENT

of the INTERIOR



Engraved and Printed at the

Warren, Easton & Pritchard

BUREAU OF PENSIONS

It is hereby certified

That in conformity with the laws of the United States, Alfred Desbeck, who was a Private, Company "G", 17th Regiment, Wisconsin Volunteer Infantry is entitled to a pension at the rate of Twenty-two dollars per month, to commence on the twenty-seventh day of August one thousand eight hundred and eighty-eight. This pension being for: Severe deafness of both ears

Otherwise Irish Regiment.

Given at the Department of the Interior this Eight day of February one thousand eight hundred and eighty-nine and of the Independence of the United States of America the one hundred and thirteenth

Mr. Philips

Secretary of the Interior.

Countersigned.

John C. Mack

Commissioner of Pensions.

①

Former payments covering any portion of the same time to be deducted.

That section forty seven hundred and forty five, title fifty seven of the Revised Statutes of the United States is hereby amended to read as follows:

Sec. 4745.— Any pledge, mortgage, sale, assignment, or transfer of any right, claim, or interest in any pension which has been, or may hereafter be, granted, shall be void and of no effect, and any person who shall pledge, or receive as a pledge, mortgage, sale, assignment or transfer of any right, claim, or interest in any pension, or pension certificate, which has been, or may hereafter be, granted or issued or who shall hold the same as collateral security for any debt, or promise, or upon any pretext of such security, or promise, shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not exceeding one hundred dollars and the costs of the prosecution; and any person who shall retain the certificate of a pensioner and refuse to surrender the same upon the demand of the Commissioner of Pensions, or a United States pension agent, or any other person, authorized by the Commissioner of Pensions, or the pensioner, to receive the same shall be guilty of a misdemeanor, and upon conviction thereof shall be fined in a sum not exceeding one hundred dollars and the costs of the prosecution.

Approved February 28, 1883.

No.

396.146

PENSION CERTIFICATE OF

Alfred Desbeck

Payable Quarterly
on the

1st of March, June, September & December,

of each year, by the

U. S. Pension Agent

at Milwaukee Wis.

TRANSFERRED TO

from _____ Agency.

Commissioner.

TRANSFERRED TO

from _____ Agency.

Commissioner.

NOTE—No sale, or transfer of any kind, of the whole or any part of the Pension payable by virtue of this Certificate is of any legal or binding force against either the Pensioner or the United States.

J. J. Jeger
Clerk.

DEC 16 1918

United States Division,
★ DEC 13 1918 ★
Bureau of Pensions

Leir. War Dir.
Sec. D.

Myers

3-1647.

Act of May 11, 1912.

Cert. 396,176

Name, Alfred Disbeck
Oconto, Wis.

Application filed Oct. 17, 1918
Service, G. 17, Wis. Sup.

~~Nov. 29/18 A.G. retu. and~~
~~Dec. 5 1918 Clt. to furnish~~
~~proof of date of birth~~
~~Census data, and~~

~~Nov. 29/18. Mar. cir. to~~
~~clerk and~~

Jan. 10, 1919. Director of
Census for age in 1860 & 1870
Jan. 10, 1919. Clt. for day and
month. C. C. L. T. as his birth date and

Civil War Division
Section D, AM-BSB
Inv.Otf. 396176
Alfred Desbeck
G 17 Wis.Inf.

January 10, 1919.

The Director of the Census,
Washington, D. C.

Sir:

For use in the above cited claim for pension, please furnish a report from the records of your office showing the age in 1860.(or if that is not satisfactory, then 1870) of the soldier, Alfred Desbeck, who lived with his foster parents, Francis and Josephine Gabriel in Robinsonville, Green Bay, Brown County, Wisconsin in 1860 and in 1870 with Sam Stephenson, in Menominee, Michigan.

He alleges that he was born in Belgium, in about 1845, and enlisted at Green Bay, Wisconsin.

Very respectfully,

M. C. TIEMAN

Acting Commissioner.

Civil War Divisio
Section D, AM-ESF
Inv.Ctf. 396,176
Alfred Desbeck
G 17 Wis.Inf.

January 10, 1919.

Mr. Alfred Desbeck,
446 Madison Street,
Oconto, Wisconsin.

Sir:

Your above entitled claim for pension, under the Act of May 11, 1912, requires that you furnish under oath and over your own signature, the day and month that you celebrate as your birth day, and how were you able to fix the same.

Very respectfully,

E. C. TIEMAN
Acting Commissioner.

With any reply refer to-
Civil War Division
Section D, AM, MSB
Inv. Ctf. 396176
Alfred Desbeck
G 17 Wis. Inf.

December 5, 1918.

Mr. Alfred Desbeck,

446 Madison Street,

Oconto, Wisconsin.

Sir:

In your above entitled claim for pension under the Act of May 11, 1912, you are required to state under oath the correct date of your birth and how you are able to fix the same.

The evidence called for in the enclosed circular letter should be fully complied with.

Very respectfully,

G. M. SALTZGABER

Commissioner.

BUREAU OF PENSIONS

Nov. 11, 1918

Inv't. No. 396196

Soldier, Alfred Desbret
Co. G, 17 Reg't Wisconsin Inf.When Certificate is issued, return
papers to Civil WarDivision for action on
white slip herewith.Em. Taber
Rer

Qty. 396 176,

Overbook,

Date of birth

Common Cull

OK

W.C.C.

1.10.19.

2-1661

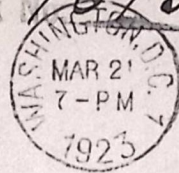
THE INTERIOR,
SIONS,
G CLERK,
2.
IN TEN DAYS.

RETO

TO THE POSTMASTER:

The Act of August 17, 1912, prohibits the delivery of this letter to any person if the addressee has died or removed, or being a widow, is believed to have remarried; and postal regulations prohibit its delivery if the pensioner has reenlisted in the military or naval service of the United States, and require its return forthwith in any such case with a statement of the reasons for so doing, and if on account of death, remarriage or reenlistment, the date thereof if known.

Check M



REGISTERED
OF
INSURANCE
VALUABLE



*Declassed
Date 7/24/23
dear*

U. S. BUREAU OF PENSIONS
MAR 27 1923
NO.

DISBURSING CLERK
MAR 7 1923
XXXX
U. S. BUREAU OF PENSIONS

SECTION ONE
RECEIVED
MAR 8 1923
DISBURSING OFFICE

[3-216.]

Ex'r.

INVALID.

G 17

No.

Acts of July 14, 1862, and March 3, 1873.

Alfred ~~Deane~~ ^{Beck}

P. O.

Oconto

Oconto Co.

Wis

Service:

At. G 17th Wis Inf

Enlisted:

Mar 30

, 1864

Discharged:

July 14

, 1865

Application filed:

Apr 19

, 1887

Alleges:

Deafness in both ears nearly total

Re-enlisted:

BOARD OF REVIEW

MAY 9 1888

2/2/13

Attorney:

Chas. J. Alden

P. O.

Shasta

Monroe Co.

Wis

Recognized.

Contract.

Cert. of Dis. Searched for

, 18

(6023-10 M.)

5 11- 87
 July 14/88
 Clait Dist.
 Allen Alden Cir Origin & Cont & names
 order ex Green Bay Wis. 47c
 Iowa Rich 9/88 M. De Cortin
 & Schanulle. In case
 letter origin to
 it. letter to coal with De Kert
 Wis. In case Schenck
 Clait Thos Hon Knapp Stephens
 Minn. wants 1 addl cont
 May 8/88 Allen Alden letter
 N.E.B.R. Case total Rev. 47c
 KANS. wants 1 addl cont
 NEV.
 COLO.
 CAL.
 OREGON.
 IND. TY.
 N. MEX.
 DAKOTA.
 WASH.
 UTAH.

cy. 376, 176,

Desbark,

Comm -

date, full

large & common

date - OK,

well,

11.29.18.

2 Briefs -
can
for

3-438

Cert. 396,76 ✓✓✓
Act May 1, 1920 ✓✓

ACCRUED PENSION

Class Invalid
Desbeck

Pensioner Alfred Desbeck

Date of death February 24, 1923 Certificate not filed.

Claimant Theresa De Beck, widow,
Oconto,
Oconto County,
Wisconsin.

Attorney none

Address _____

The fee of \$ none allowed on issue of _____ to _____ of _____ to be paid when payment is made on accrued.

Submitted Adm April 14, 1923 M.B. Mitchell, Examiner.

Approved for Admission

Pay widow as above

G.L. Crampton, Reviewer, April 17, 1923.

W.A. Alexander, Rereviewer, April 19, 1923.

Claimant does not write. No M. C.

Widow Division.

in way of writing
different name
no bar to payment.

3-416

Myers
Finance

Division

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

Washington, D. C.

Jan 7, 1919

No. Claim, _____

Cert. No. _____

396176

Claimant, _____

Soldier, _____

Alfred Tesbeck

Co. _____

9, 17 Reg't Wis Inf

Respectfully, _____

Referred to the

*Chief, Civil War
Division, for consideration
the attached letter
from the Pensioner*

W. H. Campbell

Chief of *Finance* Division.

Recd.

San Antonio, Tex.
Dec. 9th 1915

Re - Civil War Division
Section I, R.M.-L.S.R.
Ct. No. 396176
Adfred Sleebuck
Co. G. 17th Tex. Inf.

Department of Interior
Bureau of Pensions
Washington D. C.:-

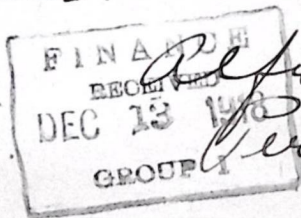
In regard
to your letter of Dec. 4th and
sending you the following
requested information,
concerning the record of my
birth.

I have no
certified copy of the public
church, or family record of

My birth.

When but an infant
I was taken from my
Orphanage at Brussels
Belgium by Francis Gabriel
and wife Josephine. All records
of my adoption and birth
were lost when the house
was burned.

The year of 1860 I was
living with my foster parents
at Oshkoshville Burna County
Wisconsin, and from there
emigrated.



Alfred Skofbeck
Per Gene Skofbeck.

Civil War Division
 Section D, ~~1~~-ESB
 Inv.Ctf. 396,176
 Alfred Desbeck
 G 17 Wis.Inf.

3-1865

DEPARTMENT OF THE INTERIOR
 BUREAU OF PENSIONS

WASHINGTON

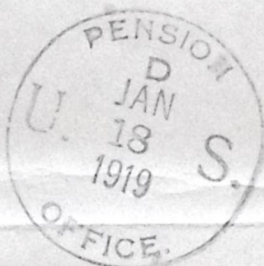
January 10, 1919.

Mr. Alfred Desbeck,
 446 Madison Street,
 Oconto, Wisconsin.

Sir:

Your above entitled claim for pension, under the Act of May 11, 1912, requires that you furnish under oath and over your own signature, the day and month that you celebrate as your birth day, and how were you able to fix the same.

Very respectfully,



E. C. Tieman
 Acting Commissioner.

Dear Sir:—

I never have celebrated birth day as all records of my birth were destroyed by fire, while living with foster parents so have nothing to refer to

Subscribed and sworn to before me, this
 January 14, 1919

Alfred ^{this} Desbeck

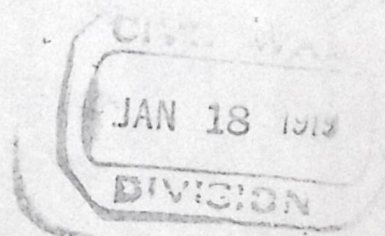
J. Hasinger
 Notary Public

Oconto Co.

Margaret Oehlman

MY COMMISSION EXPIRES FEB. 1, 1920

CW



DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

JAN 18 1919
DIVISION

January 17, 1919.

Sir:

Referring to your letter of January 10, 1919, "Civil War Division, Section D, AM:ESB, Inv. Ctf. 396176, Alfred Desbeck, G 17 Wis. Inf.", I am giving you below data secured from the Census records of 1860:

The Town of Green Bay, Brown County, Michigan,
enumerated September 1, 1860.

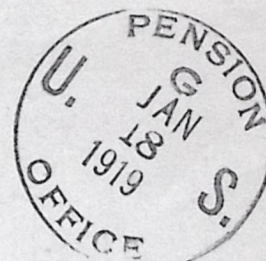
<u>Name</u>	<u>Age</u>	<u>Place of Birth</u>
Francois Gabriel	58	Belgium
Josephine "	57	"
Alfred Lebecq	15	"

Very respectfully,

James L. Rogers
Director.

CHS

Commissioner of Pensions,
Washington, D. C.



W. H. L. DIVISION.

3-879

Lane
171

Let. No. 396176

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS

WASHINGTON

Alfred Desbeck,
Co. G, 17 Reg't Wis. Vol Inf.

OCT 25 1918, 191

Let Div. Nov 18/18

Mr Alfred Desbeck,
446 Madison Street,
Oconto, Wis.
Sir:

Certificate on file to cover
dates from May 1, 1918 to
April 30 1920
Chief, Law Division

per H. M. S. B.

FOLD HERE

In the above-entitled claim for pension, there is required a certificate as to the genuineness of the signature of James A. Donlevy and showing his official character on Oct. 12, 1918, as a JUSTICE OF THE PEACE in and for the county of Oconto, State of Wis. The certificate must be attested by the clerk of the county, or a court of record, or by the officer whose duty it is to keep the records, and must bear the impress of the seal of the attesting officer. If the dates of commencement and expiration of the term of office of the above-named officer are given in the certificate, it will be placed on file for future reference, and papers executed before him during the term of office indicated therein may then be accepted without the filing of a certificate in each case.

If, for any reason, a complete certificate can not be made, you should so state, returning this circular.

Very respectfully,

Commissioner.

D.

RECEIVED
MAY 2 1918
OFFICE
S.

War Department,

ADJUTANT GENERAL'S OFFICE,

606.803-

Washington, Aug 29, 1887.

Respectfully returned to the Commissioner of Pensions.

Alfred Desbeck, a Private of Company A.,
17 Regiment Wisconsin Volunteers, was enrolled on the

30 day of March, 1864, at Green Bay. 3 yrs.

and is reported: on roll for July + Aug. 64 present,
Mar + Apr. May + June. Sept + Oct. 1864 not
on file. Nov + Dec. 64 present + same to
Apr. 30/65. May + June 65 not on file

Return for Apr. 1864 reports him "absent
on detached service" May 64 not on file. June
64 to May 1865 do not show him sick.
M.O. with Co. July 14. 65 - at Louisville Ky.

Also borne as Alfred Desbee.

FMB The records of this office furnish
no evidence of disability.

R. C. Smith

Assistant Adjutant General.

W. H. Brown (2.)

4
23

No. 606 805

BUREAU OF PENSIONS,

Alfred Desbes
Co. G. 17. Wis Vols

July 20, 1887

SIR:

I have the honor to request that you will furnish from the records of the War Department a full Report as to the service, disability, and hospital treatment of

Alfred Desbes, who, it is claimed, enlisted March 30, 1864, and served as Private in Co. G, 17 Reg't Wis Vols; also in Co.

and was discharged at Louisville Ky, July 14, 1865.

While serving in Co. G, 17 Reg't Wis. Vols he was disabled by deafness in both ears Nov 16. 1864. Disch. 25/65 & near Atlanta

also

and was treated in hospitals of which the names, location, and dates of treatment are as follows:

Please furnish Complete Military History

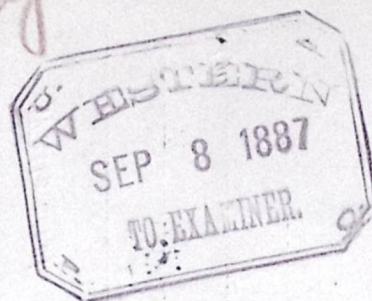
Very respectfully,

John C. Black,
Commissioner

The Adjutant General, U. S. Army.



copy 31



July 20
Sec A Western Division.

FIRST CALL

On Adjutant General, U. S. A.

Orig Ind
Claim No *606 805*

Alfred Desbes
Co G. 17. Wis Vols



DECLARATION FOR WIDOW'S PENSION

Act of April, 19, 1908,

Amended by Act of September 8, 1916, and Act of May 1, 1920.

STATE OF Wisconsin, COUNTY OF Oconto, ss:
On this 2nd day of March, 1923, personally appeared before me, a woman
within and for the County and State aforesaid, Theresa Diebeck, who, being duly
sworn by me according to law, declares that she is 63 years of age and that she was born Jan. 1, 1860, 1
at Green Bay, Settlement, Wis.
That she is the widow of Alfred Diebeck, who enlisted March 13, 1864
at Private, under the name of Alfred Diebeck
as a Private, in Co. G. 17th Wis. Vol. Inf.
(Rank.)

(Here state company and regiment, if in the Army; or vessels, if in the Navy.)

and was honorably discharged July 14, 1865, 1, having served ninety days or more during the CIVIL WAR.
That he also served
(Here give a complete statement of all other military, naval, or coast guard service, if any, at whatever time rendered.)

That otherwise than as herein stated said soldier (or sailor) was not employed in the United States service.
That she was married to said soldier (or sailor) May 3, 1883, 1, under the name
of Theresa Diebeck, at Oconto, Wis.
by F. Alimier - Justice of the Peace; that she had not been previously married; that he had not
been previously married
(Here state all prior marriages of either, and give the names and dates and places of death or divorce of all former consorts.)

None
and that neither she nor said soldier (or sailor) was ever married otherwise than as stated above.

(If any former husband rendered military or naval service, here describe same and give number of any pension claim based thereon.)
None
U. S. 14 1923 March 1, 1923
that she was not divorced from him; and that she has not remarried since his death.

That the following are the ONLY children of the soldier (or sailor) who are NOW living and under sixteen years of age,
namely:
(If he left no children under sixteen years of age, the claimant should so state.)

None born _____, 1, at _____
born _____, 1, at _____
born _____, 1, at _____
born _____, 1, at _____
born _____, 1, at _____

That the above-named child _____ of the soldier (or sailor) { is } now receiving a pension, and that such child { is a }
member _____ of her family and _____ cared for by her.

That she has not heretofore applied for pension, the number of her former claim being _____; that said soldier
(or sailor) was _____ a pensioner, the number of his pension certificate being 396176.

That she makes this declaration for the purpose of being placed on the pension roll of the United States under the provision
of the ACT OF APRIL 19, 1908, as amended by the ACT OF SEPTEMBER 8, 1916, and ACT OF MAY 1, 1920.

She hereby appoints the Adjutant General of the State of Wisconsin, of Madison, Wisconsin, her true and lawful attorney
to prosecute her claim without fee.

(Two attesting and identifying witnesses.)
(1) Allen G. Brunner
(Signature of first witness.)
Oconto, Wis.
(Address of first witness.)
(2) Mrs. Allen G. Brunner
(Signature of second witness.)
Oconto, Wis.
(Address of second witness.)

Theresa Diebeck
(Claimant's signature in full.)
Oconto, Wis.
(Claimant's address in full.)

Subscribed and sworn to before me this 2 day of March, 1923, and I hereby
certify that the contents of the above declaration were fully made known and explained to the ap-
plicant before swearing, including the words Sailor
[L. S.] erased, and the words None, added;
and that I have no interest, direct or indirect, in the prosecution of this claim.

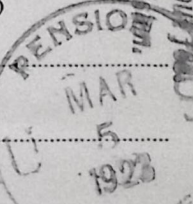
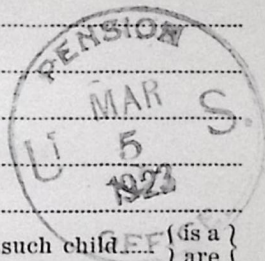
Filed By
THE ADJUTANT GENERAL OF WISCONSIN
State Agent for Pensions Attorney,
Madison, Wisconsin.

Forwarded

6-5211.

March 3 -

Julius Keisinger
(Signature.)
Notary Public
(Official character.)
MY COMMISSION EXPIRES JAN. 23, 1924



To be recognized without fee as official of State

APR 6- 1923

3-015.

Act of April 19, 1908,
Amended by Act of September 8, 1916 and
Act of May 1, 1920.

DECLARATION FOR WIDOW'S PENSION

Number 396176
Claimant Theresa DesBeck
Soldier Alfred DesBeck
Service "G" 17, Wis. Inf t

INSTRUCTIONS.

This form is to be used ONLY by or in behalf of a widow who desires to claim pension under the Act of April 19, 1908, as amended by the Act of September 8, 1916, above named, on account of the service of an officer or enlisted man who served ninety days or more in the Army, Navy, or Marine Corps during the Civil War.

Declaration and testimony in support of same to be executed before some officer authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless a certificate has been filed in the Bureau of Pensions for general reference.

Filed By

The Adjutant General of Wisconsin
Pension Attorney

Received March 3, 1923, 19.....

AN ACT

To increase the pension of widows, minor children, and so forth, of deceased soldiers and sailors of the late civil war, the war with Mexico, the various Indian wars, and so forth, and to grant a pension to certain widows of the deceased soldiers and sailors of the late civil war.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SEC. 2. That if any officer or enlisted man who served ninety days or more in the Army or Navy of the United States during the late civil war, and who has been honorably discharged therefrom, has died, or shall hereafter die, leaving a widow, such widow shall, upon due proof of her husband's death, without proving his death to be the result of his army or navy service, be placed on the pension roll from the date of the filing of her application therefor under this Act at the rate of twelve dollars per month during her widowhood, provided that said widow shall have married said soldier or sailor prior to June twenty-seventh, eighteen hundred and ninety; and the benefits of this section shall include those hundred and ninety-five; July first, nineteen hundred and two, and June twenty-eighth, nineteen hundred and six.

SEC. 3. That no claim agent or attorney shall be recognized in the adjudication of claims under the first section of this Act, and that no agent, attorney, or other person engaged in preparing, presenting, or prosecuting any claim under the provisions of the second section of this Act shall, directly or indirectly, contract for, demand, receive, or retain for such services in preparing, presenting, or prosecuting such claim a sum greater than ten dollars, which sum shall be payable only upon the order of the Commissioner of Pensions by the pension agent making payment of the pension allowed; and any person who shall violate any of the provisions of this section, or who shall wrongfully withhold from the pensioner or claimant the whole or any part of a pension or claim allowed or due such pensioner or claimant under this Act shall be deemed guilty of a misdemeanor, and upon conviction thereof shall, for each and every such offense, be fined not exceeding five hundred dollars or be imprisoned at hard labor not exceeding two years, or both, in the discretion of the court.

Approved April 19, 1908.

Section 3 of the act of Congress, approved by the President September 8, 1916, reads as follows:

SEC. 3. That any widow, as described in section two of the Act approved April nineteenth, nineteen hundred and eight, who married the soldier or sailor prior to June twenty-seventh, nineteen hundred and five, shall have title to pension under the provisions of said section of said Act, to commence from the date of filing her application in the Bureau of Pensions after the passage of this Act: *Provided, however,* That where a pension has been granted to a soldier's or sailor's helpless or idiotic child or children, or child or children under the age of sixteen years, his widow shall not be entitled to pension under this section, unless the pension to such child or children has terminated, or unless such child or children be a member or members of her family and cared for by her, and upon allowance of pension to the widow, payment of pension to such child or children shall cease.

MARGIN RESERVED FOR BINDING

Write Plainly With Unfading Ink—This Is a Permanent Record

This form of certificate is to be used only by LOCAL REGISTRARS for reporting to the REGISTER OF DEEDS. Send this certificate to the REGISTER OF DEEDS when the monthly report is mailed to the state office. DO NOT distribute these blanks to undertakers or other persons required to report deaths to you. All original certificates must be sent to the state office with the monthly reports.

7-6-22—50,000

1 PLACE OF DEATH

County Oconto
Township _____
or _____
Village _____
or _____
City Oconto

(No. _____)

(If death occurred in a hospital or institution give its NAME instead of street and number)

2 FULL NAME

(a) Residence No. 416

(Usual place of abode)

St. _____

Ward. _____

Registered No. 14

St. _____

Ward) _____

Length of residence in city or town where death occurred yrs. mos. ds. How long in U. S., if of foreign birth yrs. mos. ds.

PERSONAL AND STATISTICAL PARTICULARS

3 SEX Male 4 COLOR OR RACE White 5 SINGLE, MARRIED, WIDOWED OR DIVORCED (Write the Word) married

5a If Married, Widowed or Divorced HUSBAND of (or) WIFE of

Theresa LeBeck

6 DATE OF BIRTH (month, day and year) not known

7 AGE Years 79 Months _____ Days _____ If LESS than 1 day, _____ hours _____ min. _____

8 OCCUPATION

(a) Trade, profession or particular kind of work Day Laborer
(b) General nature of industry business, or establishment in which employed (or employer) _____

9 BIRTHPLACE (city or town) (State or country)

Belgium

PARENTS

10 NAME OF FATHER Not known

11 BIRTHPLACE OF FATHER (city or town) (State or country) Belgium

12 MAIDEN NAME OF MOTHER Not known

13 BIRTHPLACE OF MOTHER (city or town) (State or country) Belgium

14 Informant Al Brunner
(Address) Oconto, Wis

15 Filed Feb 27 1923 C.W. Stollings Registrar
Filed _____ 1923 mf Sub-Registrar

STATE OF WISCONSIN

Department of Health—Bureau of Vital Statistics
COPY OF DEATH RECORD

MEDICAL CERTIFICATE OF DEATH

16 DATE OF DEATH (month, day and year) Feb. 24 1923

17 I HEREBY CERTIFY, that I attended deceased from Jan 19 1923, to Feb 22, 1923; that I last saw him alive on Feb 22, 1923, and that death occurred on the date stated above at 8 a.m.

The CAUSE OF DEATH* was as follows:

Cutlaid of Liver

(Duration) _____ yrs. 4 mos. _____ ds.

Contributory (Secondary)

(Duration) _____ yrs. _____ mos. _____ ds.

18 WHERE WAS DISEASE CONTRACTED, IF NOT AT PLACE OF DEATH?

Did an operation precede death? no Date of _____

Was there an autopsy? no

What test confirmed diagnosis? _____

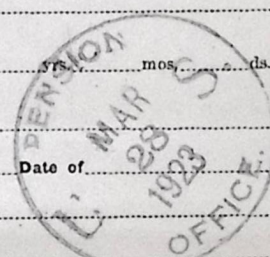
(SIGNED) C.E. Ainsworth, M. D.

426 1923 (Address) Oconto, Wis

* State the disease causing death, or in deaths from violent causes state (1) means and nature of injury; and (2) whether accidental, suicidal, or homicidal. (See reverse side for additional space.)

19 PLACE OF BURIAL, CREMATION OR REMOVAL Evergreen, Oconto DATE OF BURIAL 2/27 1923

20 UNDERTAKER H.J. Sagner ADDRESS Oconto Wis



Section 3-416

Widow

Division

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

April 4, 1923

No. Claim W.O. 1199436

Cert. No. 661886

Claimant, Frances Lawrence

Soldier, William R. Lawrence

Service, F 10 N. Y. H. A.

Respectfully referred to the

Chief Clerk inviting
attention to the
letter hereto attached
requesting blanks.

press

Chief of Widow Division.

Mitchell

CERTIFICATE OF MARRIAGE.

(To be returned within 30 days to the Register of Deeds of the County in which the license was issued.)

1. Full name of husband Alfred Debak
2. Full name of father of husband Frank Gabriel Debak
3. Full name of mother of husband (a) Josephine Debak
4. Occupation of husband Laborer
5. Residence of husband Oconto
6. Birthplace of husband Belgien (France)
7. Full name of wife previous to marriage Theresia Delforce
8. Full name of the father of wife Albert Delforce
9. Full name of the mother of wife (a) Rosalie Delforce
10. Birthplace of wife —
11. The color of the parties (b) White
12. License, No. — Date May 3^d, 1883
13. Time when marriage was contracted May 3^d, 1883
14. The place, town or township, and county where the marriage was contracted Oconto
15. By what ceremony contracted Civil
Name of person pronouncing marriage F. Deimer
16. Names of subscribing witnesses { Desire Sardinovici
Mary Shave
17. Any additional circumstances —

STATE OF WISCONSIN, }
County of Oconto } ss.

I Hereby Certify, That the foregoing marriage was solemnized by me on the day above named and that the above is a true return of said marriage, and the other facts there recorded, and that my credentials of ordination are filed in Oconto County, Wisconsin.

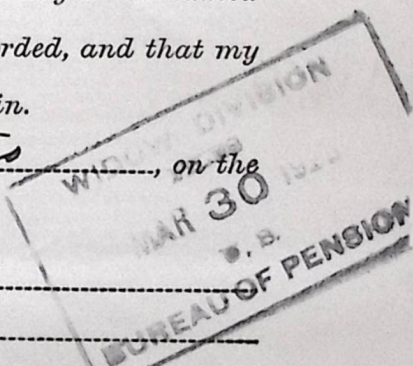
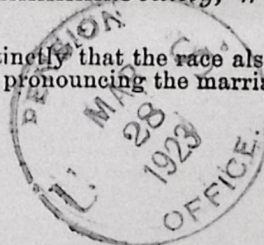
Dated at Oconto, in the County of Oconto, on the 3rd day of May, A. D. 1883

Title of clergyman, officer or other person pronouncing marriage. }

Name, (c) F. Deimer

Residence Oconto, Oconto County, Wisconsin.

NOTE.—(a) Give full name, previous to marriage. (b) State the color so distinctly that the race also may be understood as White, Black, Mulatto, Indian, Mixed White and Indian, etc. (c) The person pronouncing the marriage should sign here.



DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

March 16, 1923

No. Claim

W.O. 1159757

Cert. No.

Claimant

Soldier

Service

Respectfully

Chief of Division.

Register

190

SS

OFFICE,
WISCONSINBY
OF WISCONSIN
Attorney,
Consul.

OF Marriage.

General Statutory Provisions Relating to Marriage.

For Marriage License Law, see Chapter 301, Laws of 1899.

Who May Contract. SECTION 2329. Every male person who shall have attained the full age of eighteen years, and every female who shall have attained the full age of fifteen years, shall be capable in law of contracting marriage, if otherwise competent.

Who Shall Not Marry. SECTION 2330. No marriage shall be contracted while either of the parties has a husband or wife living, nor between parties who are nearer of kin than first cousins, computing by the rule of the civil law, whether of the half or of the whole blood, and no insane person or idiot shall be capable of contracting marriage.

SECTION 452. Any person being within the degree of consanguinity within which marriages are prohibited, or declared by law to be incestuous and void, who shall hereinafter marry with each other, shall be punished by imprisonment in the state prison not more than ten years nor less than two years.

Who May Solemnize. SECTION 2331. As amended by chapter 42, Laws of 1893. Marriages may be solemnized by any justice of the peace, municipal judge or court commissioner in the county in which he is elected or appointed, and throughout the state by any judge of a court of record, and by any ordained minister or priest in regular communion with any religious society, and who continues to be such minister or priest.

Proof of Authority to Solemnize to be Filed. SECTION 2332. Ministers or priests, before they shall be authorized to solemnize a marriage shall file a copy of their credentials of ordination or other proof of such official character, with the clerk of the circuit court of some county in this state, who shall record the same and give a certificate thereof; and the place where such credentials are recorded shall be endorsed upon each certificate of marriage granted by any minister or priest, and recorded with the same.

Examination as to Capacity to Marry. SECTION 2333. All judges, court commissioners, justices of the peace, ministers and priests shall, before solemnizing any marriage, examine at least one of the parties on oath which oath they are hereby authorized to administer, as to the legality of such intended marriage, and in no case shall such judge, court commissioner, justice, minister or priest solemnize a marriage unless he is satisfied from such an examination that there is no legal impediment thereto.

Parents' Consent Required, when. SECTION 2334. If any person intending to marry shall be under the age of twenty-one years, if a male, or under the age of eighteen years, if a female, and shall not have had a former wife or husband, the consent in person or in writing of the parent or guardian having the custody of such minor, if he or she have either a parent or guardian living in this state, shall first be given to the person solemnizing the marriage before such marriage shall take place; and if such consent is in writing, it shall be signed by the parent or guardian and attested by two witnesses, one of whom shall appear and make oath before the person who shall solemnize the marriage, that he saw such parent or guardian execute the same.

Form, Witnesses. SECTION 2335. In solemnizing a marriage, no particular form shall be required, except that the parties shall solemnly declare in the presence of the judge, minister, priest or magistrate, and the attending witnesses, that they take each other as husband and wife; and in every case there shall be at least two witnesses present, besides the person performing the ceremony.

Certificate. SECTION 2336. Whenever a marriage shall have been solemnized, the person solemnizing the same shall give to each of the parties, if requested, a certificate thereof, specifying therein the names and residence of the parties, and of at least two of the witnesses present, and the time and place of such marriage, and also stating therein that he had examined on oath one or both of the parties, and found no legal impediment to their marriage; and where the consent of the parent or guardian is necessary, stating that the same was duly given.

Marriages Not Void, when. SECTION 2337. No marriage solemnized, before any person professing to be a judge, court commissioner, justice of the peace, minister or priest, shall be deemed or judged void, nor shall the validity thereof be in any way affected, on account of any want of jurisdiction or authority in such supposed judge, court commissioner, justice of the peace, minister or priest, provided the marriage be consummated with the full belief on the part of the persons so married, or either of them, that they have been lawfully joined in marriage.

Quaker Marriages Valid. SECTION 2338. All marriages solemnized among the people called Friends, or Quakers, in the form heretofore practiced and in use in their meetings, shall be good and valid, and shall not be construed as affected by any of the foregoing provisions in this chapter.

Unlawful and Fictitious Marriages; and False Certificate thereof. SECTION 1914. Any person authorized by law to solemnize marriages, who shall knowingly join together in marriage any persons contrary to law, or when knowing of any legal impediment to the proposed marriage, or who shall make any false certificate of any marriage, or pretended marriage, or any person who shall undertake to join others in marriage, knowing that he is not lawfully authorized so to do, or who shall falsely personate another person authorized to solemnize marriages, or who shall for such purpose assume any false or fictitious name, or the name or office of another person, or who shall make any false representation, or who respect thereto, or any person who shall participate in, or in any way aid or abet any false or fictitious marriage, or if any person, authorized by law to join others in marriage, shall solemnize any marriage without first having examined at least one of the parties on oath, as to the legality of such marriage, and the age of the parties, and shall have omitted to require of all males under the age of twenty-one years, and females under eighteen years of age, the written consent of the parent or guardian of such parties, shall be punished by imprisonment in the county jail not more than one year, or by fine not exceeding five hundred dollars.

Duty of Persons who Solemnize Marriages. SECTION 1022. Statutes of 1898, as amended by Section 9, Chapter 416, Laws of 1903. Every person or society authorized by law to solemnize marriages, by or before whom any marriage may be solemnized or contracted, shall at once make a record of the same in a book therefor, which shall contain, as far as the same can be ascertained, the full name of the husband, his occupation, place of birth and residence, full name of wife previous to marriage, names of parents of husband and of wife, the color of the parties, the time and place, when and where, and by whom such marriage was contracted, and if solemnized by any clergyman or other person, his place of residence, and shall, within thirty days after such marriage, return the same facts in the form of a certificate, duly signed and dated, to the register of deeds of the county in which such marriage was contracted; and shall receive for each such certificate so returned, twenty-five cents, the said fees shall be audited and paid out of the county treasury on an itemized account in accordance with the provisions of section 1026; but no duplicates shall be counted in computing such fees; and if he shall neglect to return the same as above provided, he shall forfeit for every such neglect, not less than twenty-five nor more than one hundred dollars; provided, that action therefor shall have been commenced before such certificate of marriage shall have been actually delivered to the register of deeds of the proper county.

Certificate No. 396176
 Name, Alfred Desbeck Department of the Interior,
 BUREAU OF PENSIONS,

Washington, D. C., January 15, 1898.

SIR:

In forwarding to the pension agent the executed voucher for your next quarterly payment please favor me by returning this circular to him with replies to the questions enumerated below.

Very respectfully,

W. H. Brandt

Commissioner of Pensions.

First. Are you married? If so, please state your wife's full name and her maiden name.

Answer. yes - (Theresa Mary Desbeck) Theresa Mary Delfosse

Second. When, where, and by whom were you married?

Answer. May 3, 1883, Frank Reimer Justice of the Peace at Oconto Wisconsin

Third. What record of marriage exists?

Answer. None

Fourth. Were you previously married? If so, please state the name of your former wife and the date and place of her death or divorce.

Answer. _____

Fifth. Have you any children living? If so, please state their names and the dates of their birth.

Answer. Ida Octavia age 19, Nov 24/89 - Maggie 16 years March 27, 1882, Dollie Ethel Irene 3 years Jan 15, 1895

Witness Grace Maggie Desbeck Alfred ^{his} Desbeck _(Signature.)

Date of reply, July 4, 1898

RETURN TO
 U. S. PENSION AGENCY,
 MILWAUKEE, WIS.

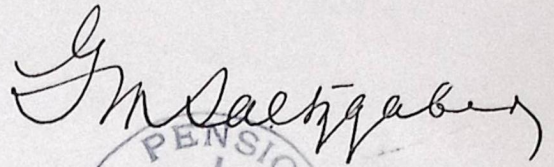
DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

WASHINGTON, D. C., January 2, 1915.

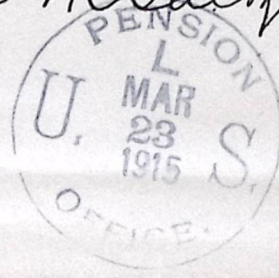
Sir: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp.

Very respectfully,

ALFRED DESBECK,
396176
OCONTO, WIS.
113 ADAMS ST.,



Commissioner.



- ✓
- No. 1. Date and place of birth? Answer. Born in Belgium in the year 1848.
The name of organizations in which you served? Answer. Company G. - 17th Regiment Wisconsin Volunteer Infantry.
- No. 2. What was your post office at enlistment? Answer. Brown County Wisconsin
- No. 3. State your wife's full name and her maiden name. Answer. Theresa Desbeck ne Delfosse
- No. 4. When, where, and by whom were you married? Answer. May 3rd 1883 Oconto Wisconsin
By Frank Deimer Justice of the Peace.
- No. 5. Is there any official or church record of your marriage? Official
If so, where? Answer. Not known have not looked it up.
- No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. Answer. No...
was never married before.
- No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any military or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. Answer. No was never married before.
- No. 8. Are you now living with your wife, or has there been a separation? Answer. I am now living with my wife.
- No. 9. State the names and dates of birth of all your children, living or dead. Answer. Ida born Nov. 28, 1884
Maggie, March 27, 1886 Irene born Jan 15, 1895.

Date March 21st 1915-

(Signature) Alfred Desbeck

Letter No. 396,176

3-389

Civil War Division. Am.

DEPARTMENT OF THE INTERIOR
BUREAU OF PENSIONS

WASHINGTON, D. C., Nov. 29, 1918

SIR: Please answer, at your earliest convenience, the questions enumerated below. The information is requested for future use, and it may be of great value to your widow or children. Use the inclosed envelope, which requires no stamp.

Very respectfully,

G. M. Safford

Commissioner.

Mr. Alfred Desbeck
Oconto
Wis.

No. 1. Date and place of birth? Answer. Born in Belgium in 1848

The name of organizations in which you served? Answer. Co. H - 17th Regiment Wisconsin Volunteer Infantry

No. 2. What was your post office at enlistment? Answer. Brown County Wisconsin

No. 3. State your wife's full name and her maiden name. Answer. Theresa Kufner

No. 4. When, where, and by whom were you married? Answer. Married May 3rd 1883
Oconto

No. 5. Is there any official or church record of your marriage? Official

If so, where? Answer.

No. 6. Were you previously married? If so, state the name of your former wife, the date of the marriage, and the date and place of her death or divorce. If there was more than one previous marriage, let your answer include all former wives. Answer. No

No. 7. If your present wife was married before her marriage to you, state the name of her former husband, the date of such marriage, and the date and place of his death or divorce, and state whether he ever rendered any military or naval service, and, if so, give name of the organization in which he served. If she was married more than once before her marriage to you, let your answer include all former husbands. Answer.

No. 8. Are you living with your wife? Answer. Yes. If there has been a separation give date of same. Answer.

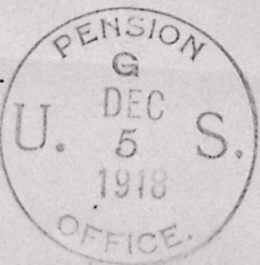
No. 9. State the names and dates of birth of all your children, living or dead. Answer. All living

Mrs Louis Edlman nee Maggie Lebeck
age 36 yrs. date of Birth March 27th 1886

Mrs Harry Monroe nee Ida Lebeck
age 39 yrs. date of Birth Nov 28th 1874

Gene Lebeck age 23 yrs.
date of Birth Jan. 15th 1895

Date Dec. 1st 1918



(Signature) Alfred Lebeck
(X) his mark
By Gene Lebeck.

The Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Application of Pension Claim for Theresa DeBeck
No. _____ account of Alfred DeBeck
(Here give Soldier's Name)
late a Private, of Co. "G", 17th Wisconsin Volunteer Infantry
(Grade) Regiment
State of Wisconsin, County of Oconto } ss.
On this 22nd day of March, A. D. 1923, personally appeared before me
Antone Hujet, a respectable citizen, entitled to credit, who
being duly sworn, says that he is a resident of City of Oconto, in the County of
Oconto, State of Wisconsin, his postoffice
address is 414 Washington Street, and he is 80 years old; he
declares that he has no interest in this claim.

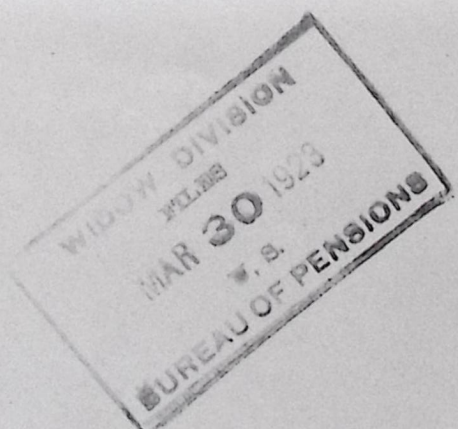
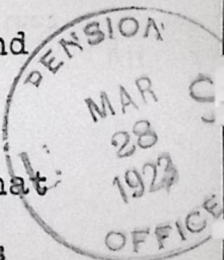
WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they testify, and write their names immediately after their statements, leaving no blank space over their signatures.
When affiant signs by mark two witnesses attest.
Jurat and Seal of Magistrate on other side.

That he has known Alfred DeBeck ever since he was fifteen years old and he knows of his own knowledge that Alfred DeBeck was not married prior to the marriage consummated between Alfred DeBeck and Theresa DeBeck (nee Delfast) and that Alfred DeBeck and Theresa DeBeck (nee Delfast) were not divorced any time prior to the death of Alfred DeBeck, and that Alfred DeBeck and Theresa DeBeck (nee Delfast) lived together as husband and wife from the date of their marriage until his death without separation or divorce. That the means of his knowledge is that he has lived in Oconto seventy years; that Alfred DeBeck has lived in Oconto ever since he was fifteen years old. That he has intimately acquainted with Alfred De Beck; that he saw him almost daily and never lived more than five blocks from him, had daily social intercourse with him and that he and Alfred DeBeck were personal friends.

WITNESSES

Adeline Hujet
Allen S. Bannum

Antone Hujet his mark



Subscribed and sworn to before me, this 22nd day of March, 1923, and I certify that

the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to him beforehe signed

the same, including the words Noneerased

and the words Noneadded; that the certificate

of my authority to act as Notary Public is on file with Clerk
(Notary Public or Justice of the Peace.) (On file with the Bureau of
of Circuit Court for Oconto County, Wisconsin,
and that I have no interest, direct or in-
Pensions or attached hereto as the case may be.)

direct, in the prosecution of this claim.

Alice I. Belongia
(Signature)

Notary Public. My commission expires
(Official Character)
September 21, 1925.

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to The Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Wid. Orig. Pension Claim,

No.

Theresa DeBeck

Acc't of Alfred DeBeck

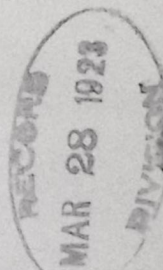
Late Co. "C", 17 Reg't

Wis. Inf.

FILED BY
THE ADJUTANT GENERAL
OF WISCONSIN
STATE AGENT FOR PENSIONS

Attorney
Madison, Wisconsin

Forwarded March 26, 1923, 19.....



The Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Application of Pension Claim for Theresa DeBeck
No. _____ account of Alfred DeBeck
(Here give Soldier's Name)
late a Private, of Co. "G," 17th Wisconsin Volunteer Infantry
(Grade) _____ Regiment _____
State of Wisconsin, County of Oconto } ss.

On this 22nd day of March, A. D. 1923, personally appeared before me
Antone Hujet, a respectable citizen, entitled to credit, who
being duly sworn, says that he is a resident of Oconto, in the County of
Oconto, State of Wisconsin, his postoffice
address is 414 Washington Street, and he is 80 years old; he
declares that he has no interest in this claim.

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they testify,
and write their names immediately after their statements, leaving no blank space over their
signatures.

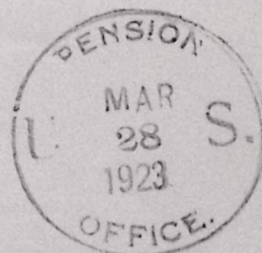
When affiant signs by mark two witnesses attest.
Jurat and Seal of Magistrate on other side.

That he has known Theresa DeBeck (nee Delfast) five years before
she was married to Alfred DeBeck and knows of his own knowledge
that Theresa DeBeck (nee Delfast) was not married prior to her
marriage to Alfred DeBeck and that she was not divorced any
time prior to the death of Alfred DeBeck and that Alfred DeBeck
and Theresa DeBeck (nee Delfast) lived together as husband and
wife from the date of their marriage until his death without
separation or divorce. That the means of his knowledge is that
he has lived in Oconto seventy years; that Theresa DeBeck (nee
Delfast) has lived here ever since she was twenty years old; that
he was intimately acquainted with her, saw her almost daily and
never lived more than five blocks from her and that they were
personal friends.

WITNESSES

Antone Hujet
Alfred G. Brunner

Antone Hujet his mark



Subscribed and sworn to before me, this 22nd day of March, 1923, and I certify that

the affiant is a reputable citizen, entitled to credit, and that the foregoing

affidavit was read and fully explained to him beforehe signed

the same, including the words.....None.....erased

and the words.....None.....added; that the certificate

of my authority to act as Notary Public is on file with Clerk
(Notary Public or Justice of the Peace.) (On file with the Bureau of

of Circuit Court for Oconto County, Wisconsin.
and that I have no interest, direct or in-
Pensions or attached hereto as the case may be.)

direct, in the prosecution of this claim.

Alice Belongia
(Signature)

Notary Public. My commission expires
September 21, 1924. (Official Character)

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to The Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

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Additional Evidence

In re Wid. Orig. Pension Claim,

No.....

Theresa DeBeck

Acc't of Alfred DeBeck

Late Co. "G", 27 Reg't

Wis. Inf.

FILED BY

THE ADJUTANT GENERAL

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney

Madison, Wisconsin

Forwarded March 26, 1923, 19.....

MAR 28 1923

The Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Application of Pension Claim for Theresa DeBeck
No. _____ account of Alfred DeBeck
(Here give Soldier's Name)
late a Private, of Co. "G," 17th Wisconsin Volunteer Infantry
(Grade) _____ Regiment _____
State of Wisconsin, County of Oconto } ss.
On this 16th day of March, A. D. 1923, personally appeared before me
Louise Hujet, a respectable citizen, entitled to credit, who
being duly sworn, says that he is a resident of Oconto, in the County of
Oconto, State of Wisconsin, her postoffice
address is 414 Washington Street, and he is 64 years old; he
declares that he has no interest in this claim.

That she has known Alfred DeBeck three or four years before he was married to Theresa DeBeck (nee Delfast) That she known of her own knowledge that he was not married prior to his marriage to Theresa DeBeck (nee Delfast) and that he has lived with Theresa DeBeck (nee Delfast) as husband and wife from the date of their marriage until his death and were not divorced. That the means of her knowledge is that she has lived in Oconto fifty years and that Alfred DeBeck has lived here during that entire time. That she was intimately acquainted with him, saw him almost daily and never lived more than five blocks from him and that they were personal friends and associated daily.

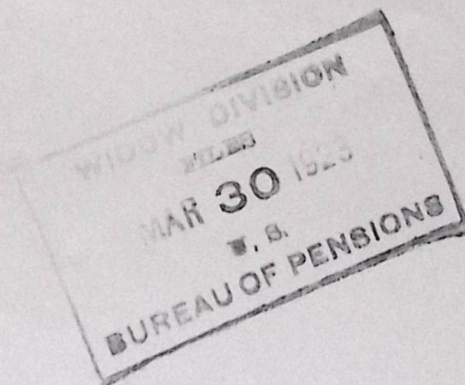
Witnesses

Louise Hujet her X mark

Arlene Hujet
Allen G. Brunner



WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they testify, and write their names immediately after their statements, leaving no blank space over their signatures.
When affiant signs by mark two witnesses attest.
Jurat and Seal of Magistrate on other side.



Subscribed and sworn to before me, this 16th day of March, 1923, and I certify that

the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to her before she signed the same, including the words none erased

and the words none added; that the certificate

of my authority to act as Notary Public is on file with clerk Circuit Court Deane County (Notary Public or Justice of the Peace.) (On file with the Bureau of

and that I have no interest, direct or in- Pensions or attached hereto as the case may be.)

direct, in the prosecution of this claim.

Alice H. Belongia
(Signature)

Notary Public
(Official Character)

My Commission Expires

Sept. 21, 1924.

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to The Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Wid. Orig. Pension Claim,

No.

Theresa DeBeck

Acc't of Alfred DeBeck,

Late Co. "G" 17 Reg't

Wis. Inf.

FILED BY

THE ADJUTANT GENERAL

OF WISCONSIN

STATE AGENT FOR PENSIONS

Attorney

Madison, Wisconsin

Forwarded March 23, 1923, 19.....

MAR 28 1923

In the matter of the application of Pension Claim for Theresa DeBeck No. account of Alfred DeBeck late a Private of Co. "G", 17th Wisconsin Volunteer Infantry.

STATE OF WISCONSIN)
 :SS
COUNTY OF OCONTO)

On this 23rd day of March, 1923, personally appeared before me Theresa DeBeck (nee Delfast) being first duly sworn, on oath, deposes and says that she is the widow of Alfred De Beck deceased; that when she and Alfred DeBeck were married, the name of the soldier was Alfred DeBeck; that owing to the fact that neither she nor the deceased soldier, Alfred DeBeck, could read or write, other people who wrote for them invariably signed their name as DesBeck; soon after she and Alfred DeBeck were married, they had children and when these children were able to read and write they corrected their name and spelled it in the correct way, that is DeBeck and ever since that time, Alfred DeBeck and the affiant have gone under the name of DeBeck instead of the incorrect name of DesBeck.

That Alfred DeBeck is the correct name of the soldier and that Alfred DeBeck and Alfred DesBeck is one and the same person.

IN PRESENCE OF

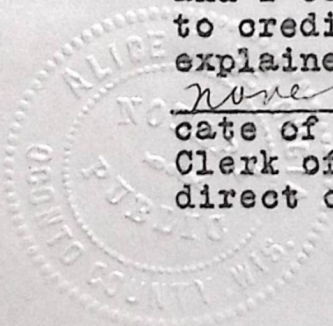
Allen G. Brunner
Arue E. Brunner

Theresa ^{her} X DeBeck
mark



Subscribed and sworn to before me, this 23rd day of March, 1923, and I certify that the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to her before she signed the same, including the words none erased and the words none added; that the certificate of my authority to act as Notary Public is on file with the Clerk of Circuit Court for Oconto County and that I have no interest direct or indirect in the prosecution of this claim.

Alice J. Belanger
Notary Public Oconto County, Wis.
My commission expires Sept 21-1924



ALFRED DESBECK,

396176

CONTO, WIS.

ACT MAY

113 ADAMS ST.,

DROP REPORT—PENSIONER

..... Cert. No.
Pensioner
Soldier M 330-13
Service
Class ACT MAY Group 1

LAW DIVISION

....., 192
In the above-described case a declaration filed
in this Division indicates that said pensioner died
....., 19.....

Per H. P. WILLEY,
Chief, Law Division.

DISBURSING DIVISION

MAR 13 1923 192
Check No. 7615684 \$ 50.00
dated MAR 4 1923 Section 1
returned by postmaster with information that the
above-described pensioner died Feb 24
1923, has been canceled.

Per N L H E. E. MILLER,
Disbursing Clerk.

FINANCE DIVISION

....., 192
The name of the above-described pensioner who
was last paid at the rate of \$ 30 per month
to Feb 4, 1923, has this day
been dropped from the roll because of death

J. Randall
Chief, Finance Division.

3-20-23 260.1201979 2012. Div.

DROP REPORT--PENSIONER

185
THERESA DE BECK

OCONTO WIS

932712

MAY WID

Cert. No.

Pensioner

Soldier

Service

Class

Remarks

JUL 31 1933

AUG 31 1933

Canceled (payee deceased)

ACCOUNTING DIVISION

AUG 17 1933

....., 193

The name of the above-described pensioner

who was last paid at the rate of \$ 40

JUN 30 1933

per month to....., 193.....,

has this day been dropped from the roll be-

DEATH

cause of JUL 5 1933

Vet. Adm.

Wm. H. HOLMES,

Fin. Form 1411

Chief Accounting Division.

Rev. Mar. 1932

By.....

The Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Application of Pension Claim for Theresa DeBeck
No. _____ account of Alfred DeBeck }
late a Private of Co. "G" 17th Wisconsin Volunteer Infantry }
(Grade) Regiment
State of Wisconsin, County of Oconto } ss.
On this 16th day of March, A. D. 1923, personally appeared before me
Theresa DeBeck (nee Delfast), a respectable citizen, entitled to credit, who
being duly sworn, says that she is a resident of City of Oconto, in the County of
Oconto, State of Wisconsin, her postoffice
address is 416 Second Street, and she is 63 years old; she
declares that she has no interest in this claim.

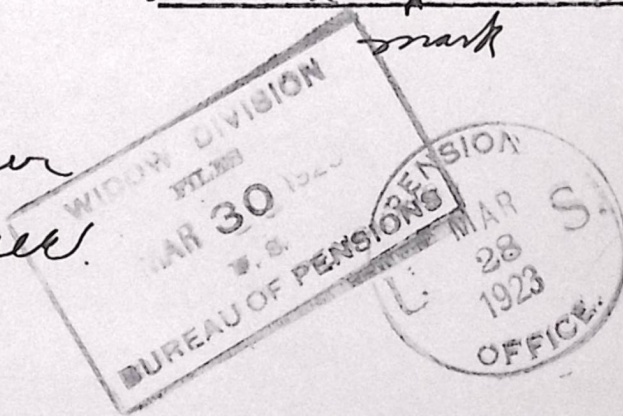
That none of claimant's members of her family served in
the Army or Navy of the United States in the World War and that
she has at no time applied for compensation of the War Risk
Insurance Bureau and that she has not received any compensation
because of the death in or since the service of any such member
of her family, or of any relation near or remote.

Witnesses

Alvin G. Brunner
Gene E. Brunner

Theresa DeBeck
mark

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE OF FACTS TO WHICH THEY TESTIFY,
and write their names immediately after their statements, leaving no blank space over their
signatures.
When affiant signs by mark two witnesses attest.
Jurat and Seal of Magistrate on other side.



Subscribed and sworn to before me, this 16th day of March, 1923, and I certify that

the affiant is a reputable citizen, entitled to credit, and that the foregoing affidavit was read and fully explained to her before she signed the same, including the words name erased and the words name added; that the certificate

of my authority to act as Notary Public is on file with Clerk
(Notary Public or Justice of the Peace.) (On file with the Bureau of
of Circuit Court Deconto County, and that I have no interest, direct or in-
Pensions or attached hereto as the case may be.)

direct, in the prosecution of this claim.

Allice DeBeck
(Signature)

Notary Public
(Official Character)

My Commission Expires
Sept. 21, 1924.

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to The Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Wid. Orig. Pension Claim,
No. 1201979 No.

Theresa DeBeck

Acc't of Alfred DeBeck

Late Co. "C", 17th Reg't
Wis. Inf.

FILED BY
THE ADJUTANT GENERAL
OF WISCONSIN
STATE AGENT FOR PENSIONS

Attorney
Madison, Wisconsin

Forwarded March 26, 1923, 19.....

MAR 28 1923

DIVISION

ACT OF MAY 1, 1920.

WIDOW'S PENSION.

Claimant *Theresa De Beck*

Soldier *Alfred De Beck*

P. O. *Oconto*

Service *Private*

County *Oconto*, State *Wisconsin*

17 Wisconsin Inf.

Rate, \$ *30* per month, commencing *March 5, 1923*

and \$ per month additional for each child, as follows:

All pension to terminate 1, date of

Payments on all former certificates covering any portion of same ~~increased to \$40 per month from~~

JULY 4, 1930 - ACT JUNE 9, 1930

<i>None</i>	Born	Commencing
	Sixteen	
	Born	Commencing
	Sixteen	<i>JUN 26 1930</i>
	Born	Commencing
	Sixteen	
	Born	Commencing
	Sixteen	
	Born	Commencing
	Sixteen	
	Born	Commencing
	Sixteen	
	Born	Commencing
	Sixteen	
	Born	Commencing
	Sixteen	

RECOGNIZED ATTORNEY.

Name *Adjutant General of Wisconsin* Fee, \$ *No*

P. O. *Madison, Wisconsin*

APPROVALS.

Submitted for *Adm April 14, 1923* *M.B. Mitchell*, Examiner.

Approved for *Admission under Act May 1, 1920*

April 17, 1923 *G. Clayton* Reviewer. *April 19, 1923* *W.A. Alexander* Rereviewer.

The soldier was pensioned at \$ *50* per month under *Act of May 1, 1920*.

Enlisted *March 30, 1864* Clt's app'n under other laws *none*

Discharged *July 14, 1865* Former marriage of soldier *none*

Reenlisted *No other service* Death } of former wife *none*
Divorce }

Discharged 1 Former marriage of claimant *none*

Invalid claim filed *April 19, 1887* Death } of former husband *none*
Divorce }

Died *February 24, 1923* Clt's marriage to soldier *May 3, 1883*

Widow's claim filed *March 5, 1923* Clt *not* remarried *nor divorced*

Claimant does *not* write. *No*, M. C.

Widow Division

Soldier was pensioned as Alfred De Beck.

STATE OF WISCONSIN, }
Oconto County } ss.

I, John Wesner, Jr., Register of Deeds, in and for the County and State afore-
said, do hereby certify that I have carefully compared the copy hereto attached with
the original ~~record~~ ^{filed} ~~now~~ in my office, which record was made on the....16th....
day of ^{Mar}.....A. D. 19²³ ~~at Oconto, Wisconsin, this 16th day of March, 1923~~ ^{Page}
~~of the original record~~ and that the same is a true and correct transcript therefrom and
of the whole thereof.

Witness my hand and official seal at Oconto on this....17th....
day of A. D. ^{March}.....19²³

.....John Wesner.....Register
M. L. Berkley Dep

The Adjutant General's Office, Wisconsin—Pension Division

GENERAL AFFIDAVIT FOR ANY PURPOSE

In the matter of the Application of Pension Claim for Theresa DeBeck
No. _____ account of Alfred DeBeck
(Here give Soldier's Name)
late a Private, of Co. "G," 17th Wisconsin Volunteer Infantry
(Grade) _____ Regiment.
State of Wisconsin, County of Oconto } ss.
On this 16th day of March, A. D. 1923, personally appeared before me
Louise Hujet, a respectable citizen, entitled to credit, who
being duly sworn, says that she is a resident of City of Oconto, in the County of
Oconto, State of Wisconsin, her postoffice
address is #14 Washington Street, and she is 64 years old; she
declares that she has no interest in this claim.

That she has known Theresa De Beck (nee Delfast) several years before her marriage to Alfred De Beck and she knows of her own knowledge that Theresa De Beck (nee Delfast) was not married to any person prior to her marriage to Alfred De Beck and that she lived with Alfred De Beck as husband and wife from the date of their marriage until his death and were not divorced. That the means of her knowledge is that she has lived in Oconto fifty years and that Theresa De Beck has lived here most of that entire time. That she was intimately acquainted with her, saw her almost daily and never lived more than five blocks from her and that they were personal friends and associated daily.

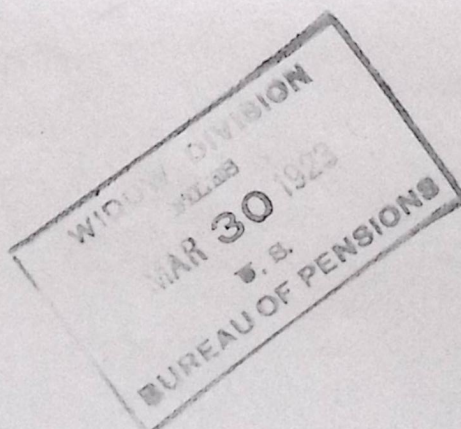
Witnesses

Louise Hujet her mark

Adlene Hujet
Allen S. Brunner

WITNESSES MUST STATE THEIR MEANS OF KNOWLEDGE of facts to which they testify, and write their names immediately after their statements, leaving no blank space over their signatures.

When affiant signs by mark two witnesses attest. Jurat and Seal of Magistrate on other side.



Subscribed and sworn to before me, this 16th day of March, 1923, and I certify that

the affiant is a reputable citizen, entitled to credit, and that the foregoing

affidavit was read and fully explained to her before she signed

the same, including the words None erased

and the words None added; that the certificate

of my authority to act as Notary Public is in file with the
(Notary Public or Justice of the Peace.) (On file with the Bureau of

Clerk of Court of Oconto County, and that I have no interest, direct or in-
Pensions or attached hereto as the case may be.)

direct, in the prosecution of this claim.

Alice Belongia
(Signature)
Notary Public
(Official Character)

My Commission Expires

Sept. 21, 1924

Under Act of Congress, approved July 1, 1890—this affidavit may be executed before a Court of Record or by a Notary Public, whose official signature must be verified by his official seal, and in case he has none, or if executed before a Justice of the Peace, his signature and official character must be certified to by a Clerk of a Court of Record, or by a City or County Clerk, unless such certificate has already been filed with the Commissioner of Pensions. When duly prepared and executed return to The Adjutant General, Madison, Wis., who prosecutes all claims for pensions—for soldiers or their heirs residing in the State, FREE OF CHARGE.

DUPLICATE OF THIS IS REQUIRED

This blank is not to be used except in claims in which the Adj. Gen. of Wis. appears as attorney.

Additional Evidence

In re Wid. Orig. Pension Claim,

No.

Theresa DeBeck

Acc't of Alfred DeBeck

Late Co. "G," 13th Reg't

Wis. Inf't.

FILED BY
THE ADJUTANT GENERAL
OF WISCONSIN
STATE AGENT FOR PENSIONS

Attorney
Madison, Wisconsin

Forwarded March 26, 1923, 19.....

MAR 28 1923

No.

606, 805

NAME OF CLAIMANT,

NAME OF SOLDIER,

Alfred Deskes

Co. 17, Reg't Wislor Reg't

Secy. & Asst. Dir.
G. J. C. Ex'r.

[3-083.]

State:

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D., C., *Feb. 9*, 188*5*.

Sir:

Please be so kind as to inform this Bureau, BY INDORSEMENT
ON THE BACK OF THIS LETTER, as to the standing in the community,
and the general reputation for truth, of

Joseph De Kent
of *Robinson, Wis.*, affiant in *Orig. Invalid*
pension claim No. 606 805, of *Alfred Desbes*,
of *Co. G*, *17 Reg't Wis. Vol.*

Your early reply will be thankfully received as sub-
stantial assistance to this Bureau in arriving at the truth
and justice of the case.

Very respectfully,

John C. Black,
Commissioner

Robinson,

Wis.

don't know of
any person by the
name of Joseph
DeKent

I know a man by
the name of Joseph
DeKerster if he is
the man I have known
him to be an
honest truthfull
man and has
a good standing
in this town

Yours

Victor Bales P.M.

Robinson

W. B.

Sec A

West. Div.

DEPARTMENT OF THE INTERIOR

BUREAU OF PENSIONS,

WASHINGTON, D. C.,

476 Exr.
My. No. 606805

Alfred Desbec

Co. G, 17. Wis. Cal.

Arch. 9, 1898

Sir:

Be kind enough to state, in your own handwriting, when and where you first saw the above mentioned soldier after his discharge from the service, and to describe the nature of the diseases with which he was suffering, and the symptoms of the same which his case then presented.

By what disease and to what extent has he been disabled for manual labor during each year since? Your immediate answer, endorsed upon the back of this letter, will be appreciated.

Very respectfully,

John C. Black

Commissioner.

B.R.H.

Joseph DeKendy

Robinson, Jr.
His.

15
Robinson March 19th 1888

I have Alfred Bebeck
at Madison Wis.
on or about the month
of August 1886.

don't remember any
disease except that
he was deaf.

Joseph Beekunster

State of Wisconsin.

County of Brown

I in the matter of the Pension
claim of Alfred Desbeck Co G 17 Reg Wis Inf-
personally came before me a U S Commissioner
in and for the County & State above named Joseph
De Keest - whose residence & P O address is
Robinson Brown Co Wis who being duly
sworn says. I am 60 years of age have
been intimately acquainted with the claimant
for the last 30 years - I came to this place
in 1854 and went on to the farm where I
now live. Claimant was the adopted son of
Gabriel Francois and Francois came here with-
out any means and I gave him the use of
ten acres adjoining me for his lifetime.
They occupied it and claimant lived with
them and often worked for me - I used
to see him most every day - most of the
time he slept at my house - he was not
deaf at all up to the time he enlisted -
when he came back I saw him right off
and he was very deaf - you could not make
him understand or hear unless you got
in front of him when he could see your
mouth and spoke very loud - he made
it his home then for three or four years after
the war until his adopted parents died, and
then went to Oconto Wis. and I didn't see
him again until about 4 years ago; until
now he is present. I know that he was
not deaf before he enlisted and that he was
very deaf when he was discharged and has

been ever since and is now on a record-
ing to my best-judgment- that he is im-
pacitated and has been ever since his discharge
at least- to the extent of one half from the
performance of manual labor by reason of
deafness- he has no trade and about the
only occupation there is for him that
he could do is working in fields & in
the woods and it is very dangerous for
a deaf man and no one wants to hire
any man that you would have to run
to and shake motion to ^{to} make him under-
stand

My residence & PO address is Robinson
Brown Co Wis and I have no interest
in this claim for pension
signed in presence of } Joseph ^{his} De Kest-
~~Tabernash~~ } mark

Subscribed sworn to before me this 30th day of Sept-
A.D. 1887 and I certify that affiant is a
respectable person entitled to credit- that the foregoing
affidavit was carefully read and fully explained
to affiant before swearing- that I have no interest
direct or indirect in the prosecution of this claim
and that a certificate of my authority as
N.S. Commissioner is on file in the Pension Bureau
Wm Brewster Bromley
N.S. Commissioner
E.S. of Wis



DEPARTMENT OF THE INTERIOR,
BUREAU OF PENSIONS,

WASHINGTON, D. C.

ANN ARBOR

Oconto City, Apr. 19th 1888.

John C. Black.

Dear Sir:—

In replying to the
letter you send to
Alfred Leabe you state
that you send a letter
addressed to Hammon
I did not received no letter.
Please send me a letter
and I will received it with
prompt attention.

Yours Respty
Florentine Hammon
Oconto City
Wis.

BX 215

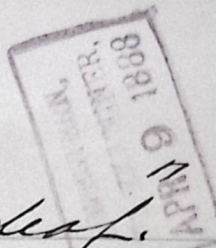
13 13

In the matter of Orig. Ex. Pension claim
No. 606.805 of Alfred Dubee, late private
in Co. G. 17th Regt. Wis. Vols.

State of Wisconsin }
County of Oconto } ss

Before me a clerk of the Circuit
Court in and for said County, comes
Florentia Hannon whose residence and
P.O. Address is Oconto Wis. who being
only sworn in relation to said matter
testifies as follows.

That he has known and been
intimately acquainted with said Alfred
Dubee since 1858, that he was not
all deaf prior to his service in said
Company. In 1865 after the war he
found the claimant a different man
altogether. A person must be three
or four steps from him (near him)
to make him hear at all. I used
to be his neighbour at Robinsonville
Brown Co Wis, close by, since 1858
till 1865 I testify he was sound &
not all deaf. He is deaf in both
ears now in a degree nearly total. In
1880 both claimant & Affiant moved to
Oconto & he has been treated for that
sickness (deafness) by Dr Morison from
1880 to 1888. The sickness grows worse
and worse. In my judgment this man
can't be able to do more than his
actual duty. He does not get more than



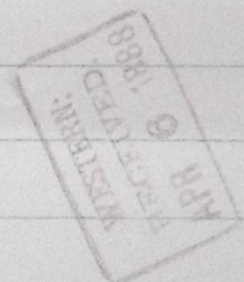
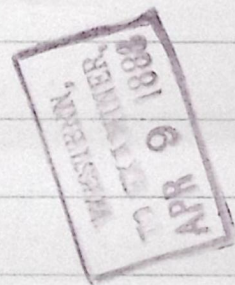
"Half the wages he could get if not deaf."

He further says he has no interest
in the prosecution of this claim and
that ~~that~~ P. H. Adams is O'Connell
O'Connell is this.

Florian H. Harmon

I made and subscribed before me
the 17th day of March A.D. 1888
and I further certify that the official
is well known to me and that his
statements are entirely correct and
that the foregoing statement was carefully
read and explained to official
before swearing and that I have
no interest in prosecution of this
claim.

R. L. Hall
Clerk Circuit Court



In the Matter of Orig. Pension Claim
(Exr.) No. 606805, of Alfred DeBee late
Private in Co. G. 17th Regt. Wis. Vols.

State of Wisconsin } ss
County of Oconto }

Before me a Clerk of Circuit
Court in and for said County, the
same being a court of record and
having a seal, comes P. J. Williams
whose residence and P.O. address
is, Oconto Oconto Wis. who
being first duly sworn doth say
in relation to said matter.

That he was first acquainted with
the claimant in 1857 and from
that time until he enlisted in above
named Company. That he was
not then deaf in any degree.
That after the war closed and
until 1875 the affiant did not see
claimant so as to judge of his condition
as to deafness. In Spring of 1875
claimant commenced working for
affiant and continued such work for
3 years. At & during this time the
claimant would be "laid up" occasionally
so that he could not work by deafness

disabling him from work. Affiant
says he thinks one quantum of
Claimant's time was lost for this
reason. He further says that
Claimant was a good man
& willing to work & therefore he kept
him although he was sometimes
disturbed as above stated.

Also that Claimant has often
worked for Affiant since is at
work for him at the present time.

That the deafness is more
Continual now than it was;
that persons speaking to him must
go close to him, else he does not
hear. He further says that
Claimant works at lower wages
than he would command if not
deaf. That such reduction in his
wages is nearly one half. That
he has no interest in prosecution of said claim.

Polydore J. Williams

Subscribed and sworn to before
me this 17th day of March 1888; that
forgoing statement was read & carefully
explained to Affiant before me; that
his statement is entitled to full credit;
and that I have no interest in said claim.

Ed Hall
Clerk Circuit Court.

Medical Evidence.

(THIS BLANK IS INTENDED FOR A SURGEON, ASSISTANT SURGEON, HOSPITAL STEWARD, PHYSICIAN OR DRUGGIST.)

TAKE NOTICE.—The affidavit should, if possible, be in the handwriting of the affiant; the marginal instructions must be carefully observed before writing out the statement, or it will not be considered by the Pension Office as satisfactory. Therefore read said instructions very carefully before undertaking to prepare this Affidavit, and then embody in your statement all the facts therein indicated. Let the diagnosis be so full and complete that a medical man could, from the description, at once and unmistakably recognize the diseases, wounds, or injuries, even though they be not technically named. All the facts in possession of affiant as to the origin and continuance of the disability should be fully set forth, and the dates of treatment should be specifically given. If the affidavit is prepared from memoranda in possession of the physician, that fact should be stated.

INSTRUCTIONS.

READ CAREFULLY.

The Physician's Affidavit must show the following facts:

The affiant should state in his own handwriting these facts following:

1. The length of time he has been practicing medicine.
2. Whether or not he knew the soldier prior to enlistment; the length of time he has known him, how intimately he has had of observing his physical condition, whether as his family physician or as a neighbor; and how near he has lived to him. If he knew that the soldier was a sound man at enlistment, he should so state, adding, if true, that had he been unsound he would have known it.

3. If he treated claimant while in the service, either as his regimental surgeon or while claimant was home on furlough, that fact should be stated. The claimant's physical condition at such times should be clearly shown, as well as the nature of his disability and dates of treatment.

4th. If he has treated soldier since discharge he should so state, giving the date of his first treatment, what his physical condition was at the time, with complete diagnosis of the disability; the period during which he treated him should be stated, with dates, as near as possible, of the prescriptions.

5. The extent or degree to which the claimant has been unable to perform manual labor during each year from discharge to the present time.

6. Where the disability was the sequel of a wound received, injury incurred, or disease contracted in the service, the pathological connection between them must be clearly and fully set forth by the physician, together with the reasons upon which he bases his conclusions.

State of Wisconsin County of Frank SS.

In the pension claim No. 606805 of Alfred Leske
(Name of Claimant.)

Co G. Private 14th Regt Wis. Vol. Inf
(Rank, Company, Regiment and State, if in the army; or vessel and rank if in the navy.)

Personally came before me, a Clerk of the Circuit Court in and for
(Clerk of the Court or his Deputy, Notary Public or Justice of the Peace, as the case may be.)

Dr. D. P. Moriarty
(Name of Surgeon, Assistant Surgeon, Hospital Steward, Physician or Druggist.)

the aforesaid County and State... Oconto, Oconto Co. Wis
whose Post-office address is...

well known to me to be reputable and entitled to credit, and who, being duly sworn, declares in relation to the aforesaid case as follows:.....

That he is a practicing Physician and that he has been acquainted with said soldier for about eight years,
and that.....
(Here embody all the facts known to the affiant in accordance with the marginal instructions. No erasures or interlinations will be permitted unless the magistrate certifies in his jurat that they were made before executing the paper.)

I have been practicing medicine over 30 years. Did not know soldier prior to enlistment, have known him for about eight years, as a neighbor during said time, and have had opportunities of observing his physical condition, both as neighbor and physician, have lived within one quarter of a block of said applicant during said time. Does not know whether soldier was sound at enlistment. Did not treat soldier while in the service of the U.S. or on furlough. Have treated soldier, occasionally since 1885 for deafness, almost total pain presented for same affection at least a year up to date. Have reason to believe that the almost total deafness was the result of discharges of artillery and infantry before Atlanta Georgia about the month of November, 1864. The deafness has been increasing, and is now 1/2 disabled from manual labor, and has been so off and on during the years aforesaid. Is my personal knowledge. The disability is doubtless the result of aforesaid injuries received while in the service of the U.S. From ordinary conclusions it seems that the affliction above mentioned is closely connected

Return all Blanks not needed in this case to CHARLES J. ALDEN, Sparta, Wisconsin.

with the present State of the Applicant's
Service - That is, private, first entered
Seafarer.

He further declares that he has been a practitioner of medicine for over 30 years, and that he has no interest either direct or indirect, in the prosecution of this claim.

J. Monais, M.D.
Signature of Physician or Surgeon. If ever in the Army or Navy, give rank and service.
Late Capt 23rd Inf Vol Inf

Sworn to and subscribed before me this 19th day of March A. D. 1888, and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the above declaration, were fully made known to him before swearing, including the words.....

.....erased, and the words.....

added; and that I have no interest, direct or indirect, in the prosecution of this claim.

P. L. Hall
(Name of officer before whom executed.)
Clerk of Circuit Court
Clerk of the Court or his Deputy, Notary Public or Justice of the Peace, as the case may be.

I.....Clerk of the Circuit Court in and for aforesaid County and State do certify that....., Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing..... in and for said county and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this.....day of.....188

[L. S.]

Clerk of the.....

NOTE.—This should be sworn to before a CLERK of the COURT or his DEPUTY, or any NOTARY PUBLIC or JUSTICE of the PEACE, provided if executed before a Notary or Justice, the certificate of the court must be attached unless the Notary or Justice has a certificate already on file in the Pension Office. In such case the Notary or Justice must state that such certificate is on file. Neglect to comply with this requirement will cause trouble and delay.

DIVISION

Medical Evidence.

No.....

(Character of Claim.)

(Name of Claimant.)

(Name of Soldier.)

Late.....
Rank

Co.....

Regt.....
Vols

(Name of Affiant.)

Late.....

(Rank.)

Regt.....
Vols

FILED BY CLAIMANT'S ATTORNEY,

Charles J. Alden,

U. S. PENSION CLAIM AGENT

And War Claim Attorney,

SPARTA, - - WISCONSIN.

(3-061.)

RECEIVED

MAR 13 1888

Division

Department of the Interior,

BUREAU OF PENSIONS,

March 10, 1888.

Respectfully requested of the ADJUTANT
GENERAL U. S. A. a report from the records of his

Office as to the presence or absence, on or about
Nov 16/64 to Dec 20, 1865,
of Lt August Contin
Pvt Vital Delarmell

WESTERN,

TO EXAMINER,

MAY 3 1888

of Co G

and the station, at that date, of the *17*

His Col

my ser

Claim No. *606 810*

Alfred Desbes

Reg G. 17 His Col

John C Black

Commissioner.



Sir:

As regarding the reputation
of Vilal Delaruelle I have always
known ^{him} as an Honorable and
honest man
yours truly F. H. Gosin

BUREAU OF PENSIONS,

Washington, D., C., March 9, 1888.

Sir:

Please be so kind as to inform this Bureau, BY INDORSEMENT
ON THE BACK OF THIS LETTER, as to the standing in the community,
and the general reputation for truth, of

Vital Delasnell
of Walham, Wis., affiant in Orig. Ins.
pension claim No. 606815, of Alfred Desbes,
of Co. G, 17 Reg't Wis. Vol.

Your early reply will be thankfully received as sub-
stantial assistance to this Bureau in arriving at the truth
and justice of the case.

Very respectfully,

John C. Black,
Commissioner

Postmaster,

Walham,
Wis.

606,815

War Department,

ADJUTANT GENERAL'S OFFICE,

Washington, May 7, 1888.

Respectfully returned to the Commissioner of Pensions.

_____, of Company _____
Regiment _____ Volunteers, was enrolled on the
day of _____, 186____, at _____,
and is reported: _____

Roll of Co G, 17th Wisconsin Vols for Nov. & Dec. 64
reports August Conton 1st Sergt. and Votab De-
laruelle private present. Jan & Feb. 65. Conton
2^d Lieut & Delaruelle private presents. Return
for Nov. 64 does not report either absent
Mar 1865. Conton 2^d Lieut present. Delaruelle
not reported absent,

Co. were on a raid, destroying des Foying Rail-
road &c, near Atlanta Ga, Nov. 13 to 16th 1864

Station Mar. 31, 65 Goldsboro N.C.

R. C. DRUM,

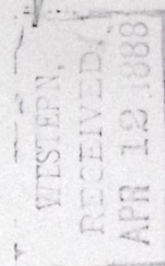
Adjutant General.

By

91/2

DEPARTMENT OF THE INTERIOR,
BUREAU OF PENSIONS.

WASHINGTON, D. C.



Sec A

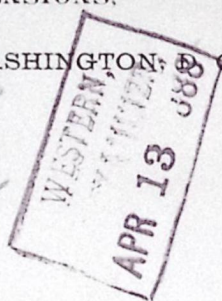
West. Div.

428 Exp.

My. No. 606885

Alfred Decker

Co G, 17 Wis. Vol.



March 9, 1888

Sir:

To further aid this Bureau, in the adjudication of the above cited claim, please furnish a statement, in your own handwriting, setting forth all the facts within your personal knowledge, relative to the incurrence of the soldiers

deafness of both ears

concerning which you have heretofore testified. In your reply please be as specific as possible in respect to dates, and describe as clearly as you can the nature, symptoms and extent of the *disability*.

Your immediate answer, endorsed upon the back of this letter, will be appreciated,

Very respectfully,

John C. Black
Commissioner.

Vital Delarmelle,

William, Wis.

Green Bay Wis April 5 1888

Mr S. J. [unclear]

Alfred Dube & I enlisted in Co G 17 at the same time - were together all the time - slept together all the time I was in the army about 18 months - he had no deafness - but after the battle at Atlanta when we were on the march to the sea I noticed that he was very deaf I had to speak very loud to make him hear -

I can't say if it was the heavy artillery firing caused it or a cold or what - but I know he became very deaf & that he wasn't so before and that he continued to be so and is so yet

It is so difficult for me to write - it is almost impossible any more than my name - and I have asked Mr W. B. Browley to write this for me

Very respectfully Yours

Wital Delouelle

PROOF OF DISABILITY.

NOTE.—This affidavit must be executed by a Commissioned Officer, if possible, but, if not possible to secure such evidence, then two of the soldier's comrades should testify.

TO BE EXECUTED BY AN OFFICER OR TWO COMRADES OF THE SOLDIER'S COMPANY AND REGIMENT HAVING PERSONAL KNOWLEDGE OF THE CIRCUMSTANCES UNDER WHICH THE DISABILITY WAS INCURRED ON ACCOUNT OF WHICH PENSION IS CLAIMED.

State the nature of the wound or injury received, and in what part of the body located; or the name and nature of the disease or disability incurred. State what caused the disability, and upon what particular duty the soldier was engaged at the time it was incurred. If on special duty, by whose order was he acting. If the injury was a rupture, be particular to state its location, and whether you saw it at the time of or immediately after its incurrence, or at any time while in the service. State whether you saw him at the date of or immediately previous to discharge; also when, where, and whether the disability named then existed. State whether the soldier was in sound bodily health, and especially free from the disabilities upon which claim for pension is based, at the time he enlisted, and immediately preceding the date of incurring his disabilities. State your source of information, whether present at the time and place, and an eye-witness to the facts related. If in command of company when the disability was incurred, so state.

Before filling in this Affidavit, the witness should read carefully the instructions, and conform thereto in every particular, as far as his knowledge of the facts will allow.

Prepare your statement on a separate sheet of paper, correct it carefully, and then transfer it to this blank.

State of Wisconsin County of Brown SS.

In the matter of the Pension claim of Alfred Dubuck
Co. 17th Reg't Wis Vols., personally came before me.

a N S Cummings in and for the aforesaid County and State
(Title of officer administering oath.)

Vital Delamelle of Town of Green Bay County of
(Name of affiant.)

Brown State of Wisconsin, who, being duly sworn,

declares in relation to the aforesaid claim that his age is 46 years; that he is the identical person

who served as a Private in Co. G 17th

Reg't Wis Inf. Vols., and knows the above soldier, who was a member of Co. G

17 Reg't Wis Inf., that on or about the _____ day of _____

_____, 186____, while in the line of duty, and without fault or improper conduct on his part, at or near

Atlanta, State of Georgia, said soldier incurred

deafness. It was in one of the battles near Atlanta

(Here state the time and manner in which the wound or other injury was received. Describe the wound or injury, the part of the body

Georgia just before Sherman started on his march

wounded or injured, and all the circumstances attending it. If sickness, state time and place when contracted, what caused it, the name of

the Sea I noticed just after that he was deaf-

the sickness, and how it affected him. All facts known to affiant relative to soldier's medical treatment for his disability while in the service

then was heavy artillery firing close to us and I supposed

should be stated, giving time and place, if possible.)

that was the cause - then was ringing roaring in my

ears too but - I didn't get deaf - I was in the same

line when we had our and his bunk mate -

spread blankets & slept together most all the time -

we was in the service - I know he was not deaf

before that. we were very intimate because we were both

Belgium & spoke only a few words of English -

we were discharged & came home together, and I have seen him

from time to time since and he has always been very deaf

and I think incapacitated for the performance of manual

labor by reason of such deafness at least to the extent of

one half

That the facts stated are personally known to the affiant by reason of I was right with him

(Here state whether affiant was with the com-

at the time and almost all the time he was in the service

part of the time the claimant contracted his disability, or whether his knowledge was otherwise obtained.

And deponent further states that he is well acquainted with the claimant,
..... And deponent further states that the claimant was a sound and able-bodied
man at and prior to enlistment, so far as he knew, and that he is totally disinterested in this claim.

Post-office address of affiant is Malhain P.O. Kewanee Co Wis

(If Affiant sign by mark, two persons who can write sign here.)

(Signature of Affiant.)

STATE OF Wisconsin COUNTY OF Brown SS.

Sworn to and subscribed before me this 30th day of September 1887, by the
above named affiant, and I certify that I read said affidavit to said affiant, including the words,

.....erased, and the words, added,

and acquainted him with its contents before he executed the same. I further certify that I am in nowise in-
terested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that
he is a creditable person. a certificate of my authority as Notary Public is on file in the

Pension Bureau Wausau, Wis.
(Name of officer before whom executed.)

[L. S.] Notary Public
(State whether Justice, Notary, Clerk or Deputy Clerk)

I, Clerk of the Circuit Court in and for aforesaid County and State
do certify that,, Esq., who hath signed his name to the
foregoing, declaration and affidavit was at the time of so doing
in and for said county and State duly commissioned and sworn; that all his official acts are entitled to full faith and
credit, and that his signature thereunto is genuine.

Witness my hand and seal of office this day of 188

(Name of the Clerk or Deputy Clerk.)

[L. S.]

(Name of what Court.)

NOTE.—This should be sworn to before a Clerk of the Court or his Deputy, or any Notary Public or Justice of the
Peace, provided if executed before a Notary or Justice, the certificate of the court must be attached, unless the Notary
or Justice has a certificate already on file in the Pension Office. In such case the Notary or Justice must state that such
certificate is on file. Neglect to comply with this requirement will cause trouble and delay.

DIVISION.

Affidavit of Officer or Comrade.

Additional Evidence.

No. 606805

Alfred Deobea
(Character of Claimant.)

No. (Name of Claimant.)

(Name of soldier.)

Late Private
(Rank.)

Co

G

Regt.

17th

Vols.

AFFIDAVIT OF

Vital Delamelle
(Name of Affiant.)

Late Private
(Rank.)

Co

G

Regt.

17th

Vols.

FILED BY CLAIMANT'S ATTORNEY,

CHARLES J. ALDEN

U. S. Pension Claim Agent and War Claim Attorney

SPARTA, WISCONSIN.

Sec. A. West
470 Div.
Ex'r.

[3-983.]

State

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D., C., *Feb. 9*, 188*8*.

Sir:

Please be so kind as to inform this Bureau, BY INDORSEMENT
ON THE BACK OF THIS LETTER, as to the standing in the community,
and the general reputation for truth, of *Lieutenant*
August Courtin
of *Mt. Vernon, Dak.*, affiant in *Cruz. Sw.*
pension claim No. 606805, of *Alfred Desbes*,
of Co. *G*, 17 Reg't *Wis. Vol.*

Your early reply will be thankfully received as sub-
stantial assistance to this Bureau in arriving at the truth
and justice of the case.

Very respectfully,

John C. Black,
Commissioner

Postmaster,

Mt. Vernon,

Dakota.

Mt Vernon March 20th, 1888
J. C. Black yours of the 9th at hand

Sir I am well acquainted with August Canton
his standing in this community and
General reputation is good i cannot say that ^{he} was
or was not in the army i was not acquainted with
him untill he came to, Dak

Yours truly

Michael Dougherty P. M.

PROOF OF DISABILITY.

NOTE.—This affidavit must be executed by a Commissioned Officer, if possible, but, if not possible to secure such evidence, then two of the soldier's comrades should testify.

TO BE EXECUTED BY AN OFFICER OR TWO COMRADES OF THE SOLDIER'S COMPANY AND REGIMENT HAVING PERSONAL KNOWLEDGE OF THE CIRCUMSTANCES UNDER WHICH THE DISABILITY WAS INCURRED ON ACCOUNT OF WHICH PENSION IS CLAIMED.

State the nature of the wound or injury received, and in what part of the body located; or the name and nature of the disease or disability incurred. State what caused the disability, and upon what particular duty the soldier was engaged at the time it was incurred. If on special duty, by whose order was he acting. If the injury was a rupture, be particular to state its location, and whether you saw it at the time of or immediately after its incurrence, or at any time while in the service. State whether you saw him at the date of or immediately previous to discharge; also when, where, and whether the disability named then existed. State whether the soldier was in sound bodily health, and especially free from the disabilities upon which claim for pension is based, at the time he enlisted, and immediately preceding the date of incurring his disabilities. State your source of information, whether present at the time and place, and an eyewitness to the facts related. If in command of company when the disability was incurred, so state.

Before filling in this Affidavit, the witness should read carefully the instructions, and conform thereto in every particular, as far as his knowledge of the facts will allow.

Prepare your statement on a separate sheet of paper, correct it carefully, and then transfer it to this blank.

State of Sakota County of Quora ss.

In the matter of the Pension claim of Alfred Desbeck

Co. G. 14, Reg't Wis. Vols., personally came before me,

a Leonty Belen in and for the aforesaid County and State

(Title of officer administering oath.)
August Beutin of, Mt. Vernon County of

Savison State of Sakota, who, being duly sworn,

declares in relation to the aforesaid claim that his age is 59 years; that he is the identical person

who served as a 2d Lieutenant in Co. G. 14,

Reg't Wis. Vols., and knows the above soldier, who was a member of Co. G. 14,

Reg't Wis. Vol., that on or about the Nov day of

1864, while in the line of duty, and without fault or improper conduct on his part, at or near

State of, said soldier incurred

(Here state the time and manner in which the wound or other injury was received. Describe the wound or injury, the part of the body

wounded or injured, and all the circumstances attending it. If sickness, state time and place when contracted, what caused it, the name of

the sickness, and how it affected him. All facts known to affiant relative to soldier's medical treatment for his disability while in the service

should be stated, giving time and place, if possible.)

August Beutin I was second Lieut. of Co G 14th Wis vol

inf in the late war and I was with my Co nearly all

the time and during the march of Sherman to the sea

from the 16 day of November 1864 untill final muster out in

July 1865

I know Alfred Desbeck Private of Co G 14th Wis vol

I was in service some 18 years I recollect when we started

on march with Sherman that I had to speak to said Desbeck

often he had very hard time to ear on account of deafness in both

ears I ask him what was the matter with him he said he come deaf

on account. Caused by the Discharge of artillery & musketry Close to

him & when we got to goldsboro N. C. I was near entirely deaf

& remain so untill Discharged the last I see him & said claimant was a

summons when he joined the Co I have no interest whatever in the case

That the facts stated are personally known to the affiant by reason of being with the Co all the time when

(Here state whether affiant was with the com-

he contracted his Deafness

pany at the time the claimant contracted his disability, or whether his knowledge was otherwise obtained.

August Beutin
2d Lieut of Co G 14th Wis vol

This Blank is Prepared by and for the exclusive use of Charles J. Alden, Sparta, Wis.

Return all Blanks not needed in this case to CHARLES J. ALDEN, Sparta, Wisconsin.

And deponent further states that he is well acquainted with the claimant.

Alfred Sebech

And deponent further states that the claimant was a sound and able-bodied man at and prior to enlistment, so far as he knew, and that he is totally disinterested in this claim.

Post-office address of affiant is.

Wt. Vernon S.D.

August Cantin

(If Affiant sign by mark, two persons who can write sign here.)

(Signature of Affiant.)

STATE OF

Territory Dakota

COUNTY OF

Beckham

SS.

Sworn to and subscribed before me this *21* day of *Sept*, 188*7*, by the

above named affiant, and I certify that I read said affidavit to said affiant, including the words.

erased, and the words. added,

and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a creditable person.

J R Drake

(Name of officer before whom executed)

County Clerk

(State whether Justice, Notary, Clerk or Deputy Clerk)

I, Clerk of the Circuit Court in and for aforesaid County and State

do certify that, Esq., who hath signed his name to the

foregoing, declaration and affidavit was at the time of so doing,

in and for said county and State duly commissioned and sworn; that all his official acts are entitled to full faith and

credit, and that his signature thereunto is genuine.

Witness my hand and seal of office this day of 188

(Name of the Clerk or Deputy Clerk.)

[L. S.]

(Name of what Court.)

NOTE.—This should be sworn to before a Clerk of the Court or his Deputy, or any Notary Public or Justice of the Peace, provided if executed before a Notary or Justice, the certificate of the court must be attached, unless the Notary or Justice has a certificate already on file in the Pension Office. In such case the Notary or Justice must state that such certificate is on file. Neglect to comply with this requirement will cause trouble and delay.

DIVISION.

Affidavit of Officer or Comrade.

Additional Evidence.

No. *606805*

(Character of Claim.)

Alfred Sebech

(Name of Claimant.)

(Name of soldier.)

Wt. Vernon

(Rank.)

Vols.

AFFIDAVIT OF

August Cantin

(Name of Affiant.)

(Rank.)

Vols.

FILED BY CLAIMANT'S ATTORNEY,

CHARLES J. ALDEN

U. S. Pension Claim Agent and War Claim Attorney,

SPRINGFIELD, WISCONSIN.

Civ. War Div. Sec. S. & M.
DEPARTMENT OF THE INTERIOR,
BUREAU OF PENSIONS.

Washington, D. C., *Nov. 29 - 1918*

Respectfully referred to

The Adjutant General,
War Department,

requesting a report of any additional military and medical history of the soldier, such as the records may now afford, including all absences without authority, arrests and confinements, with dates of beginning and ending of each; if court-martialed, the findings, sentence and date of promulgation, and when restored to duty, personal description and all ages not shown in reports herewith returned. If soldier had other service, the same information relative thereto is desired.

Certificate No. *396.176.*

Name, *Alfred Desbeck*

Service. *G. 17. Wis. Inf.*

Inspector

Commissioner.

2 Enclosures.

12 Received NOV 29 1918

WAR DEPARTMENT,

THE ADJUTANT GENERAL'S OFFICE,

WASHINGTON,

DEC 5 - 1918

Respectfully returned to the

Commissioner of Pensions,

with the information that in the case of

Alfred Desbeck,

Co. *G*, *17* Reg't *Wis. Inf.*

in addition to the statement or statements herewith returned, the military records show the following:

Age *18*, height *5* feet, *4* inches,

complexion *light*

eyes *blue*, hair *light*

place of birth *Belgium*

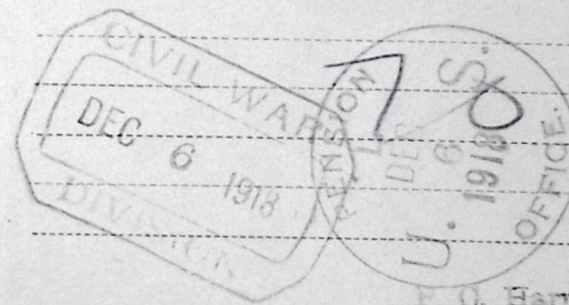
occupation *farmer*

Other records show him April 30, 64 absent on Det. Service.

No other age and no unauthorized absence, arrest confinement or quarter mil. record found.



The medical records show him treated as follows:
No medical record found



F. O. Harris
The Adjutant General.

State of Wisconsin.

County of Brown ss

Alfred Desbeck being duly sworn says I cannot give any medical opinion as asked for for the following reason
My deafness was caused by heavy artillery firing close to me near Atlanta Ga. I did not go to any Surgeon as I thought I would get better and never went to any Doctor since as I had no idea that anything could be done for me and I had no money to spare for it. I still have no idea that any Doctor could do me any good they might say so to get money from me but I don't believe it. I submit the affidavit of Vital Delamelle a comrade who was my most intimate friend Brunswick and Joseph De Kunst always a near neighbor at whom house I was as much as at home from the time I was a little child until about 11 years ago and who has seen me several times since and known of me through friends all the time and I respectfully request that they be received as it is the best possible for me to obtain

Signed in presence of

Jabien Coel

} Alfred ^{his} Desbeck
Mark

Subscribed sworn to before me this 30 day of Sept: A. D. 1887 & I certify that affiant is a respectable person sensible to credit that he signed the same in my presence that it was read & carefully explained before signing that I have no interest direct or indirect in the prosecution of this claim and that a certificate of my authority as U.S. Commissioner

Mission is on file in the Pension Bureau
Van Buren Bradley
N.S. Commission
E.S. of Wis

No 606805

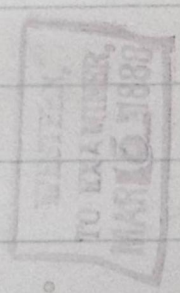
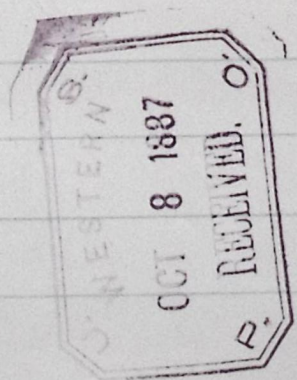
Offred Deobee

Offred Deobee

Offred Deobee



clerk



Michigan, & worked in
a lumber manufacturing mill
of Sam Stephenson one year
in 1870, and since 1870 I came
to Oconto which is the place I
live at present.

I work at the present time for
Balcom's saw-mill Oconto
Oconto Co. Wis.,

Dear sir that is all the inform-
ation I can give you.

Concerning the disability by
which contracted on Sherman's
march to the sea deafness of
both ears in a degree nearly
total from the 16th of Nov. 1864
to the 25th of March 1865 caused
by the discharge of musketry & ar-
tillery.

For the treatment of my case I
was always too poor to treat me

Your Servant
Alfred Desbec
Oconto
Oconto Co.
Wis. c



Beonto, July 28, 1887.
Dear sir: John C Black.

I answer to your letter, that I received the 19th of July. To give you information as near as I can. After the war was over I lived with my father and mother 3 years from 1865 to 1868. My mother died 1867 & my father died in 1868 in Robinsonville, Town of Green Bay, Brown County, Wis. Then I was obliged to leave home & live with a neighbor close by by the name of Joseph Deskester from the same place. I worked for him one year that is in 1869, then I left him & went to Menominee, state of

Declaration for an Original Invalid Pension.

THIS MUST BE EXECUTED BEFORE A COURT OF RECORD OR SOME OFFICER THEREOF HAVING CUSTODY OF THE SEAL.

State of Wisconsin County of Oconto

ON THIS 13th day of April A. D. one thousand eight hundred and eighty seven personally appeared before me a clerk of the Circuit Court a COURT OF

RECORD within and for the county and State aforesaid Alfred Desbec

aged 45 years, who, being duly sworn according to law, declares that he is the identical

of Alfred Desbec who was ENROLLED on the 30th

day of March, 1864, in company G. 17th Regt of the Wis. Infy.

regiment of Volunteers (Vet.) commanded by Simon O. Kane

and was honorably DISCHARGED at Louisville Ky. on the 14th

day of July, 1865 : That his personal description is as follows: Age 45 years;

height 5 feet 4 inches; complexion light hair light; eyes blue

That while a member of the organization aforesaid, in the service and in the line of his duty at or near

Atlanta and after leaving there in the State of Georgia, on Shenandoah

March 1864 from November 16th 1864 to

on or about the 25th day of March, 1865, he contracted deafness

"in both ears existing to a degree nearly

"total" caused by discharges of artillery &

musketry close to him, principally at Atlanta, and

the trouble was increased by poor

exposure

That he was treated in the hospitals as follows: None. Nor has he

been treated since, being very poor and

because it would take too much money from him

if he could be cured at all

That he has not been employed in the military or naval service otherwise than as stated above

[Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.]

That he has not been in the military or naval service of the United States since the 14th day of

July, 1865. That since leaving the service this applicant has resided in the County of

Oconto in the State of Wisconsin, and that his occupation

has been that of a Laborer. That prior to his entry into the service above named

he was a man of good, sound, physical health, being, when enrolled, a Laborer

That he is now partially disabled from obtaining his subsistence by manual labor by

reason of his injuries, above described, received in the service of the United States; and he therefore makes this declar-

ation for the purpose of being placed on the invalid pension roll of the United States. He hereby appoints with full

power of substitution and revocation, CHARLES J. ALDEN, of Sparta, Monroe County, Wisconsin, his true and

lawful attorney, to prosecute his claim. That he has not received or applied for a pension;

that his residence is No. Oconto, Oconto

County, Wisconsin and that his post office address is Oconto, Wis.

Alfred Desbec

Gloria Hannon

[Two persons who can write must sign here.]

Alfred Desbec

[Signature of Claimant.]

Mark

This Blank is prepared, by and for the exclusive use of CHARLES J. ALDEN, Sparta, Wis.

Return all blanks not needed in this case to CHARLES J. ALDEN, Sparta, Wisconsin.

Also personally appeared Florentin Hammon, residing at Deer Creek,
Deer Creek, Wis., and B. G. Gammert,
residing at Deer Creek, Wis., persons whom I certify to be respectable
and entitled to credit, and who, being sworn, say that they were present and saw Alfred
Deer Creek, the claimant, sign his name (make his mark) to the foregoing
declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with
him that he is the identical person he represents himself to be; and that they have no interest in the prosecution of
this claim.

(If Affidavits sign by mark, two persons who can write here.)

Sworn to and subscribed before me this 13th day of April A. D. 1887, and I hereby
certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and
witnesses before swearing, including the words.....
.....erased, and the words.....
.....added; and that I have no interest direct or indirect in the prosecution of
this claim.

[L. S.]

Clerk of the

NOTE.—This must be sworn to before your most convenient CLERK OF THE COURT. Any other than the
CLERK or his DEPUTY will not do. If this application is executed before a Justice of the Peace, or a Notary Pub-
lic, it will be WORTHLESS. Neglect to comply with this requirement will cause trouble and delay.

INVALID CLAIM FOR PENSION

ORIGIN ALL.

Alfred Deobress Applicant.

Co. As. 17th Regt. Vol.

Wasconsin

Enlisted March 30 1864

Discharged July 14 1865

FILED BY

Plaintiff's Attorney,

Charles J. Alden,

U. S. Pension Claim Agent

AND

WAR CLAIM ATTORNEY,

Sparta, Monroe County, Wis.

ORIGINAL INVAL.

(3-530)

396176
Soldier,

P. O.,

County,

State,

Rates, \$

Alfred Desbeck

Aconto

Aconto

Wisconsin

Rank,

Private

Company,

Regiment,

17 Wis. Vol. Infantry

per month, commencing

Apr 19, 1887

Irish Brigade

Pensioned for

Severe deafness of both ears

RECOGNIZED ATTORNEY.

Name,

Charles J. Alden

Fee, \$

25, Agent to pay.

P. O.,

Shasta Wis

Articles filed

April 19, 1887

APPROVALS.

Approved for

admission for deafness in both ears

Submitted

May 8, 1888

George J. Cook

Examiner.

Approved for

Impaired hearing of both ears

Approved for

Severe deafness of both ears

12/18

May 12 1888

Legal Reviewer

May 16, 1888

Re-Reviewer

T. H. Thompson

Med. Ex'r,

Carpenter, Med. Reviewer,

May 18, 1888

John Campbell, Med. Referee.

IMPORTANT DATES.

Enlisted,

March 30

1864

service from

Mustered

18

18

to

18

in

Discharged

July 14

1865

Declaration filed

April 19

1887

Not in service since

July 14

1865

BASIS OF CLAIM.

Testifies in Declaration filed April 19, 1887 that at Atlanta Ga & subsequently on the march to the sea from Jan. 16, 64 to Aug. 25, 65 he contracted deafness in both ears nearly total caused by discharges of Artillery and Musketry principally at Atlanta

INVALID PENSION.

Act of Aug. 27, 1888

Claimant,

Alfred Desbeck

(Irish Brigade)

P.O.,

Oconto

Rank,

Private

County,

"

Company,

"G"

State,

Wisconsin

Regiment,

17 Wis. Vol. Inf.

Rate, \$ 22 per month, commencing

August 27, 1888,

Disabled by

Severe deafness of both ears.

RECOGNIZED ATTORNEY:

Name,

NONE

Fee \$

NONE

Agent

to pay.

P.O.,

RULING 124

Articles filed

18

APPROVALS:

Submitted for

Mr. Jan. 31, 1889.

H. P. Holden, Examiner.

Approved for

Severe deafness of both ears.

Approved for

Severe deafness of both ears

22/30 from Aug 27, 1888

Cm7

Feb 4

1889,

R. S. Holden

Legal Reviewer.

Woodman W. C.

Feb 5, 1889,

John Campbell

Medical Referee.

ACT OF MAY 11, 1912.

DECLARATION FOR PENSION.

THE PENSION CERTIFICATE SHOULD NOT BE FORWARDED WITH THE APPLICATION

State of Wisconsin, County of Oconto, ss:On this 12th day of October, A. D. 1918, personally appeared before me, a Justice ofthe Peace within and for the county and State aforesaid, Alfred Desbeck,who, being duly sworn according to law, declares that he is 72 years of age, and a resident of Ocontocounty of Oconto, State of Wisconsin; and that he is the identical person

who was ENROLLED at _____, under the name of

Alfred Desbeck, on the 30th day of March, 1864, as a Private,in Co "B" 17 Regiment Wis. Vol Inf.

(Here state rank, and company and regiment in the Army, or vessels if in the Navy.)

in the service of the United States, in the Civil war, and was HONORABLY DISCHARGED

(State name of war, Civil or Mexican.)

at Louville Ky., on the 14th day of July, 1865

That he also served _____

(Here give a complete statement of all other services, if any.)

That he was not employed in the military or naval service of the United States otherwise than as stated above. That his personal description at enlistment was as follows: Height, five feet, four inches; complexion, light; color of eyes, blue; color of hair, light; that his occupation was Farmer; that he was born _____, 18____, at Belgium

(If it is desired to claim under the disability clause, the nature of the disability and the date, place, and circumstances under which it was incurred in line of duty should be

alleged in this space. A disability which did not originate in the service and in line of duty can not be considered.)

That his several places of residence since leaving the service have been as follows: Bay Settlementa short time, balance of time Oconto,
Wisconsin

(State date of each change, as nearly as possible.)

That he is a pensioner under certificate No. 396,176 That he has _____ applied for pension under original

No. _____ That he makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the act of May 11, 1912.

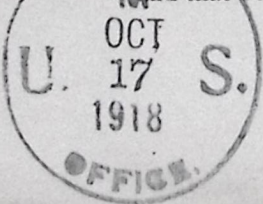
That his post-office address is 440 Madison Ave, county of Oconto,State of Wisconsin,Attest: (1) Alfred Desbeck his(2) James A. Boulton Alfred X Desbeck
(Signature in full.)SUBSCRIBED and sworn to before me this 12th day of October, A. D. 1918, and I hereby

certify that the contents of the above declaration were fully made known and explained to the applicant

before swearing, including the words _____

and the words _____, added;

and that I have no interest, direct or indirect, in the prosecution of this claim.



James A. Boulton
(Signature.)
Justice of the Peace
(Official character.)

IF A PENSIONER, DO NOT FAIL TO GIVE CERTIFICATE NUMBER.

SEE COPY OF ACT ON BACK OF THIS FORM.

Notified OCT 25 1918 19

Declaration accepted as
a claim under the act
of May 11, 1912.

Chief, Law Division.
Per *[Signature]*

Chief, Law Division,
Per *[Signature]*

Certificate on file to cover
date, *from May 4-1914*
to Apr. 30-1920.
Chief, Law Division
For W. L. A. NOV 14 1918

c 6-803

That any person who served ninety days or more in the military or naval service of the United States during the late Civil War, who has been honorably discharged therefrom, and who has reached the age of sixty-two years or over, shall, upon making proof of such facts, according to such rules and regulations as the Secretary of the Interior may provide, be placed upon the pension roll and be entitled to receive a pension as follows: In case such person has reached the age of sixty-two years and served ninety days, thirteen dollars per month; six months, thirteen dollars and fifty cents per month; one year, fourteen dollars per month; one and a half years, fourteen dollars and fifty cents per month; two years, fifteen dollars and fifty cents per month; two and a half years, fifteen dollars and fifty cents per month; three years or over, sixteen dollars per month. In case such person has reached the age of sixty-six years and served ninety days, fifteen dollars and fifty cents per month; six months, sixteen dollars and fifty cents per month; one year, sixteen dollars per month; one and a half years, sixteen dollars and fifty cents per month; two years, seventeen dollars per month; two and a half years, seventeen dollars per month; three years or over, eighteen dollars per month; four years, eighteen dollars per month; four years and served ninety days, eighteen dollars per month; five years, twenty dollars per month; five years and served ninety days, twenty dollars per month; six months, twenty-two dollars and fifty cents per month; one year, twenty-four dollars per month; one and a half years, twenty-five dollars per month; two years, twenty-seven dollars per month; two years and over, thirty dollars per month. That any person who served in the military or naval service of the United States during the Civil War and received an honorable discharge, and who was wounded in battle or in line of duty and is now unfit for manual labor by reason thereof, or who from disease or other causes incurred in line of duty resulting in his disability is now unable to perform manual labor, shall be paid the maximum pension under this Act, to wit, thirty dollars per month, without regard to length of service or age. That any person who has served sixty days or more in the military or naval service of the United States in the War with Mexico and has been honorably discharged therefrom, shall, upon making like proof of such service, be entitled to receive a pension of thirty dollars per month.

All of the aforesaid pensions shall commence from the date of filing of the applications in the Bureau of Pensions after the passage and approval of this Act: *Provided*, That pensioners who are sixty-two years of age or over, and who are now receiving pensions under existing laws, or whose claims are pending in the Bureau of Pensions, may, by application to the Commissioner of Pensions, in such form as he may prescribe, receive the benefits of this Act; and nothing herein contained shall prevent any pensioner or person entitled to a pension from prosecuting his claim and receiving a pension under any other general or special Act: *Provided*, That no person shall receive a pension under any other law at the same time or for the same period that he is receiving a pension under the provisions of this Act: *Provided further*, That no person who is now receiving or shall hereafter receive a greater pension, under any other general or special law, than he would be entitled to receive under the provisions herein shall be pensionable under this Act.

Sec. 2. That rank in the service shall not be considered in applications filed hereunder.

Sec. 3. That no pension attorney, claim agent, or other person shall be entitled to receive any compensation for services rendered in presenting any claim to the Bureau of Pensions, or securing any pension, under this Act, except in applications for original pension by persons who have not heretofore received a pension.

Sec. 4. That the benefits of this Act shall include any person who served during the late Civil War, or in the War with Mexico, and who is now or may hereafter become entitled to pension under the Acts of June twenty-seventh, eighteen hundred and ninety, February fifteenth, eighteen hundred and ninety-five, and the joint resolutions of July first, nineteen hundred and two, and June twenty-eighth, nineteen hundred and six, or the Acts of January twenty-ninth, eighteen hundred and eighty-seven, March third, eighteen hundred and ninety-one, and February seventeenth, eighteen hundred and ninety-seven.

Sec. 5. That it shall be the duty of the Commissioner of Pensions, as each application for pension under this Act is adjudicated, to cause to be kept a record showing the name and length of service of each claimant, the monthly rate of payment granted to or received by him, and the county and State of his residence; and shall at the end of the fiscal year nineteen hundred and fourteen tabulate the record so obtained by States and counties, and shall furnish certified copies thereof upon demand and the payment of such fee therefor as shall be provided by law for certified copies of records in the executive departments.

ACT APPROVED MAY 11, 1912.

3-014.

ACT OF MAY 11, 1912.

Amended by Act of June 10, 1918

CLAIM FOR PENSION.

Certificate No.

Name. (

Service,-

INSTRUCTIONS.

This form may be used for original pension or increase of pension.

Declaration and testimony in support of same to be executed before some officer of a court of record having custody of its seal, a notary public, justice of the peace, or other officer authorized to administer oaths for general purposes. If such officer is not required by law to have and use a seal, his official character, signature, and term of office must be certified by the proper State, county, or city officer under his official seal, unless such certificate has been filed in the Bureau of Pensions for general reference.

CIVIL WAR
OCT 26 1918
DIVISION

Reissue
ACT OF MAY 11, 1912.

Cert. No. 396,176

Claimant, Alfred Desbeck

446, Madison Street
P. O., Oconto, Scout

County, Oconto, Scout

State, Wisconsin

Rank, Private

Service, Co. 4, 17 Wisconsin Inf.

Rate, \$ 30 per month, commencing October 17, 1918

ATTORNEY OR STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name, _____

Fee, \$ _____; Agent to pay.

P. O., _____

Articles filed _____, 19

APPROVAL.

Submitted for Ad: Nov 5, 1918; A. Meyer, Examiner.

Approved for Admission Rate \$ 30 per month; age undetermined years.

Reissue from General Law

Length of pensionable service: 1 years, 3 months, 15 days.

Deductions in service from any cause: None years, _____ months, _____ days,

on account of _____

November 11, 1918, P. M. Taber Nov. 16, 1918, W. Kitcham
Legal Reviewer. Re-Reviewer.

Enlisted March 30, 1864; honorably discharged July 14, 1865

Enlisted _____, 18; honorably discharged _____, 18

Enlisted _____, 18; honorably discharged _____, 18

Length of pensionable service: 1 years, 3 months, 15 days.

Pensioned at \$ 22 per month, under General Law

PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed Oct. 17, 1918

Age shown by evidence undetermined 72 years; date of birth alleged not stated, 1845

Claimant does not write.

52-9
52-1

Reissue correct rate
ACT OF MAY 11, 1912.

Cert. No. 396,176

Claimant,

P. O.,

County,

State,

Rate, \$

(alfr.)

Alfred Desbeck

Oconto (446 Madison St.)

Oconto

Wisconsin

Rank,

Service,

Private

Co. G. 17th Wisconsin Inf.

35 per month, commencing

October 17, 1918

ATTORNEY OR STATE REPRESENTATIVE.

(Order April 25, 1907.)

Name,

P. O.,

Fee, \$, Agent to pay.

Articles filed, 19

APPROVAL.

Submitted for

Admin: Jan'y 23, 1919

A. Myre

Examiner.

Approved for

~~Increase~~

Rate \$

35

per month; age

over 72

years.

Reissue to correct rate

Date of birth: September 1, 1845

Length of pensionable service:

1 years,

3 months,

15 days.

Deductions in service from any cause:

none

years,

months,

days,

on account of

January 25, 1919

Em Sabar

Jan'y. 28, 1919

W. Kitcham

Legal Reviewer.

Re-Reviewer.

Enlisted

March 30, 1864

honorably discharged

July 14, 1865

Enlisted

18

;

honorably discharged

18

Enlisted

18

;

honorably discharged

18

Length of pensionable service:

1 years,

3 months,

15 days.

Pensioned at \$

30

per month, under

Act of May 11, 1912, as amended
by Act of June 10, 1918.

PRESENT CLAIM, ACT OF MAY 11, 1912.

Declaration filed

Jan'y 7, 1919

Age shown by evidence

72

years; date of birth

alleged

September 1, 1845

Claimant does

not

write.